| Fill in this information to identify your case: | |
|---|---|
| United States Bankruptcy Court for the: Eastern District of California | |
| Case number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: | Identify | Yourself |
|---------|----------|----------|
| | | |

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|--|---|
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture | Dixie | |
| | identification (for example, your driver's license or | First name | First name |
| | passport). Bring your picture | Middle name Hill | Middle name |
| | identification to your meeting with the trustee. | Last name | Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | Dixie | |
| | have used in the last 8 | First name | First name |
| | years | Violet | |
| | Include your married or maiden names. | Middle name Hill | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| | | | |
| 3. | Only the last 4 digits of your Social Security number or federal | xxx - xx - <u>6</u> <u>7</u> <u>8</u> <u>3</u> | xxx - xx |
| | Individual Taxpayer Identification number (ITIN) | 9 xx - xx | 9 xx - xx |

Debtor 1 Dixie Hill Case number (if known) Case number (if known)

| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|--|----------------|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in | ☑ I have not used any business names or EINs | | ☐ I have not used any business names or EINs. |
| | the last 8 years | Business name | _ | Business name |
| | Include trade names and doing business as names | Business name | | Business name |
| | | EIN | | EIN |
| | | EIN | | EIN |
| 5. | Where you live | | | If Debtor 2 lives at a different address: |
| | | 7927 Tantura Way | | |
| | | Number Street | | Number Street |
| | | 0.000 | | |
| | | Sacramento CA 958 City State ZIP C | | City State ZIP Code |
| | | Sacramento | | |
| | | County | | County |
| | | If your mailing address is different from the o above, fill it in here. Note that the court will sen any notices to you at this mailing address. | ne d | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | _ | Number Street |
| | | P.O. Box | _ | P.O. Box |
| | | City State ZIP C | Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petitic I have lived in this district longer than in any other district. | on, | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | | |
| | | | | |
| | | | | |

Debtor 1

| Dix | ie | | | |
|-----|----|--|--|--|
| | | | | |

| HIII | | |
|-----------|--|--|
| Last Name | | |

| Case number (# | known) | |
|----------------|--------|--|

Part 2: Tell the Court About Your Bankruptcy Case

| 7. | The chapter of the Bankruptcy Code you | | | a brief description of each, se form 2010)). Also, go to the to | | | U.S.C. § 342(b) for Individuals Filing appropriate box. | | |
|-----|--|------------------------|-------------------------------------|---|------------------|---|--|--|--|
| | are choosing to file under | ☑ Chap | oter 7 | | | | | | |
| | under | ☐ Chapter 11 | | | | | | | |
| | | ☐ Chap | ter 12 | | | | | | |
| | | ☐ Chap | oter 13 | | | | | | |
| | | | | | | | | | |
| 8. | How you will pay the fee | local yours subn | court for self, you nitting y | or more details about how u may pay with cash, cash | you m ier's c | nay pay. Typicall heck, or money | eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check | | |
| | | | | ay the fee in installments for Individuals to Pay The | | | | | |
| | | By la less pay t | w, a jud than 15 he fee | dge may, but is not require 60% of the official poverty l | ed to, vine the | waive your fee, a at applies to you iis option, you m | ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the <i>Application to Have the</i> with your petition. | | |
| _ | Have you filed for | | | | | | | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ☐ No ☑ Yes. | District | Eastern District of California | When | 02/27/2016 | Case number 2016-21135 | | |
| | | | District | Eastern District of California | When | MM / DD / YYYY 11/20/2010 MM / DD / YYYY | Case number 2010-50733 | | |
| | | | District | | When | MM / DD / YYYY | Case number | | |
| 10 | Are any bankruptcy | ₽ N. | | | | | | | |
| 10. | cases pending or being | ✓ No Yes. | Dobtor | | | | Relationship to you | | |
| | filed by a spouse who is not filing this case with | — 163. | | | When | | Case number, if known | | |
| | you, or by a business partner, or by an affiliate? | | 2.0 | | | MM / DD / YYYY | | | |
| | | | Debtor | | | | Relationship to you | | |
| | | | District | | When | MM / DD / YYYY | Case number, if known | | |
| 11. | Do you rent your residence? | ☐ No. ☐ Yes. | | ur landlord obtained an eviction | on judg | ment against you? | ? | | |
| | | | ☐ Yes | Go to line 12. s. Fill out <i>Initial Statement Abo</i> t of this bankruptcy petition. | out an | Eviction Judgment | Against You (Form 101A) and file it as | | |
| | | | | | | | | | |

| Debtor 1 | Dixie | | Hill | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | Eiret Name | Middle Name | Last Namo | |

| | Are you a sole proprietor | ☑ No. Go to Part 4. | | | | | |
|----|---|---------------------|---|-------------------------|----------------|------------------------------------|--|
| | of any full- or part-time business? | ☐ Yes. | Name and location of b | usiness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | | |
| | a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a | | Number Street | | | | |
| | separate sheet and attach it to this petition. | | City | | | ZIP Code | |
| | | | Oh a shall a samura misata da | h | | | |
| | | | Check the appropriate & Health Care Busine | • | | | |
| | | | ☐ Single Asset Real E | • | - , ,, |)) | |
| | | | ☐ Stockbroker (as def | ` | • ` | <i>))</i> | |
| | | | ☐ Commodity Broker | | | | |
| | | | ☐ None of the above | (40 4004 | 3 10 1(0)) | | |
| | For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D). | | the Bankruptcy Code. | | | tor according to the definition in | |
| 9 | art 4: Report if You Own o | or Have | Any Hazardous Prop | perty or Any Prope | rty That Needs | Immediate Attention | |
| | Do you own or have any | ☑ No | | | | | |
| 4. | property that poses or is | ☐ Yes | What is the hazard? | | | | |
| 4. | alleged to pose a threat | 00 | | | | | |
| 4. | of imminent and identifiable hazard to public health or safety? | _ 163 | | | | | |
| 4. | of imminent and identifiable hazard to | _ 103 | If immediate attention | is needed, why is it ne | eded? | | |
| 4. | of imminent and identifiable hazard to public health or safety? Or do you own any property that needs | _ 100 | If immediate attention | is needed, why is it ne | eded? | | |
| 4. | of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | _ 100 | If immediate attention Where is the property | | | | |
| 1. | of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | _ 133 | | ? | | | |

Debtor 1

|)ixie | | Hill | |
|---------|-------------|-----------|--|
| ot Nomo | Middle Name | Lost Name | |

Case number (if known)____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About | Debtor | 1: |
|-------|--------|----|
|-------|--------|----|

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | about |
|---|-------|
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

| _ | I received a briefing from an approved credit |
|---|--|
| | counseling agency within the 180 days before |
| | filed this bankruptcy petition, and I received a |
| | certificate of completion. |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan. if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | bout |
|---|------|
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Certificate Number: 15725-CAE-CC-032487449



CERTIFICATE OF COUNSELING

I CERTIFY that on March 22, 2019, at 7:47 o'clock PM EDT, Dixie Hill received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 22, 2019 By: /s/Eris Aparicio

Name: Eris Aparicio

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

| Debtor 1 | Dixie | | Hill | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | Eiret Name | Middle Name | Lact Namo | |

| Part 6: | Answer These Ques | tions for Reporting Purposes | | | |
|----------------|--|--|---|----------------------------|---|
| | at kind of debts do have? | 16a. Are your debts primarily as "incurred by an individual pr ☐ No. Go to line 16b. ☐ Yes. Go to line 17. | | | |
| | | 16b. Are your debts primarily | | | |
| | | money for a business or invest No. Go to line 16c. | ment or through the operat | on of the business or in | ivestment. |
| | | Yes. Go to line 17. | | | |
| | | 16c. State the type of debts you ow | e that are not consumer de | bts or business debts. | |
| | you filing under pter 7? | ☐ No. I am not filing under Chapt | er 7. Go to line 18. | | |
| Do | you estimate that after | Yes. I am filing under Chapter 7 administrative expenses a | . Do you estimate that after | any exempt property is | excluded and |
| | exempt property is luded and | ☑ No | e paid that faride will be av | | noodica ordators. |
| are avai | ninistrative expenses paid that funds will be ilable for distribution nsecured creditors? | ☐ Yes | | | |
| 18. How | v many creditors do | 1 -49 | 1 ,000-5,000 | 25,0 | 01-50,000 |
| you owe | estimate that you | 50-99 | 5,001-10,000 | · | 01-100,000 |
| owe | , r | ☐ 100-199 ☐ 200-999 | 1 0,001-25,000 | ☐ More | e than 100,000 |
| 19. How | v much do you | \$0-\$50,000 | □ \$1,000,001-\$10 million | n 🖵 \$500 | 0,000,001-\$1 billion |
| | mate your assets to | \$50,001-\$100,000 | 310,000,001-\$50 millio | | 00,000,001-\$10 billion |
| be v | vorth? | \$100,001-\$500,000 | \$50,000,001-\$100 mil | | 000,000,001-\$50 billion |
| | | □ \$500,001-\$1 million | □ \$100,000,001-\$500 m | illion | e than \$50 billion |
| | much do you | \$0-\$50,000 | □ \$1,000,001-\$10 million | | 0,000,001-\$1 billion |
| estii to b | mate your liabilities | \$50,001-\$100,000 | \$10,000,001-\$50 millio | . , | 00,000,001-\$10 billion |
| 10 0 | C : | \$100,001-\$500,000 \$500,001-\$1 million | \$50,000,001-\$100 mil \$100,000,001-\$500 m | | 000,000,001-\$50 billion e than \$50 billion |
| Part 7: | Sign Below | 4 \$300,001-\$1 million | 4 \$100,000,001-\$300 III | IIIIOII 🗀 IVIOI | e than \$50 billion |
| For you | u | I have examined this petition, and I correct. | declare under penalty of pe | rjury that the information | on provided is true and |
| | | If I have chosen to file under Chapte of title 11, United States Code. I under Chapter 7. | | | |
| | | If no attorney represents me and I of this document, I have obtained and | | | attorney to help me fill out |
| | | I request relief in accordance with the | ne chapter of title 11, United | States Code, specified | d in this petition. |
| | | I understand making a false statem with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and | n fines up to \$250,000, or in | | |
| | | /s/ Dixie Hill | × | | |
| | | Signature of Debtor 1 - Dixie Hil | <u></u> | Signature of Debtor 2 | |
| | | Executed on 03/28/2019 MM / DD / YYYYY | | Executed on MM / DD / | YYYYY |

| Debtor 1 | Dixie | | Hill | Case number (if known) | Case number (if known) | | | |
|--|----------------------------------|-------------|---|------------------------|------------------------|--|--|--|
| | First Name | Middle Name | Last Name | | | | | |
| represented by one If you are not represented | | nted | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | |
| | orney, you do file this page. | o not | ✗ /s/ Mark Shmorgon | Date | 03/28/2019 | | | |
| | | | Signature of Attorney for Debtor - Mark S | | MM / DD / YYYY | | | |
| | | | Mark Shmorgon Printed name Law Offices of Mark Shmorg Firm name 5015 Madison Ave., Suite A Number Street | on | | | | |
| | | | Sacramento City | CA State | 95841 ZIP Code | | | |
| | | | Contact phone (916) 640-7599 | Email address | shmorgonlaw@gmail.com | | | |
| | | | 055000 | CA | | | | |
| | | | 255939 | | | | | |

Filed 03/28/19 Case 19-21911 Doc 1

| 00,20,20 | 30,20,20 | | |
|---------------------|------------------------------|------------------------------|-----------|
| Fill in this in | nformation to identify y | our case: | |
| Debtor 1 | Dixie | | Hill |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court for the: Ea | astern District of Californi | a |
| Case number | | | |
| (If known) | | | |
| | | | |

| Check one box only as directed in this form and in | |
|--|--|
| Form 122A-1Supp: | |

- 1. There is no presumption of abuse.
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
- 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Column A

Column B

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | | | | Debtor 1 | Debtor 2 or non-filing spouse |
|----|---|----------------------------|-----------------------------------|---------------|----------------|-------------------------------|
| 2. | Your gross wages, salary, tips, bonuses, overtime, as (before all payroll deductions). | nd commis | sions | | \$0.00 | \$ |
| 3. | Alimony and maintenance payments. Do not include p Column B is filled in. | ayments fro | m a spouse it | : | \$0.00 | \$ |
| 4. | All amounts from any source which are regularly paid of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3. | nclude regu your depend | lar contributio dents, parents | ns S, | \$ <u>0.00</u> | \$ |
| 5. | Net income from operating a business, profession, or farm Gross receipts (before all deductions) | Debtor 1 | Debtor 2 | | | |
| | Ordinary and necessary operating expenses | - \$ | - \$ | | | |
| | Net monthly income from a business, profession, or farm | \$ | \$ | Copy here→ | \$0.00 | \$ |
| 6. | Net income from rental and other real property | Debtor 1 | Debtor 2 | | | |
| | Gross receipts (before all deductions) | \$ | \$ | | | |
| | Ordinary and necessary operating expenses | - \$ | - \$ | | | |
| | Net monthly income from rental or other real property | \$ | \$ | Copy here | \$0.00 | \$ |
| 7. | Interest, dividends, and royalties | | | | \$0.00 | \$ |

| Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you | \$ <u>0.00</u> | Column B Debtor 2 or non-filing spouse \$ | |
|--|---------------------|---|---|
| Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: | \$ 830.68 s 0.00 | \$\$ | |
| under the Social Security Act. Instead, list it here: For you \$ | \$ 830.68 s 0.00 | \$ | - |
| Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$ <u>0.00</u> | \$ | |
| Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$ <u>0.00</u> | | |
| . Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | • | | |
| . Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | | \$ | |
| . Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$ <u>0.00</u> | \$ | |
| column. Then add the total for Column A to the total for Column B. | + \$0.00 | + \$ | - |
| Determine Whether the Means Test Applies to You | \$830.68 | + \$N/A- | \$ 830.68 Total current monthly income |
| | | | |
| . Calculate your current monthly income for the year. Follow these steps: | | _ | |
| 12a. Copy your total current monthly income from line 11 | | Copy line 11 here→ | \$ 830.68 |
| Multiply by 12 (the number of months in a year). | | | x 12 |
| 12b. The result is your annual income for this part of the form. | | 12b. | \$_9,968.16 |
| . Calculate the median family income that applies to you. Follow these steps: | | | |
| Fill in the state in which you live. | | | |
| Fill in the number of people in your household. | | | |
| Fill in the median family income for your state and size of household. | | 13 | \$56,580.00 |
| To find a list of applicable median income amounts, go online using the link specified in instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | ** |
| . How do the lines compare? | | | |
| 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>The</i> Go to Part 3. | ere is no presumpt | ion of abuse. | |
| 14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presump</i> Go to Part 3 and fill out Form 122A–2. | tion of abuse is de | termined by Form 122 | A-2. |
| art 3: Sign Below | | | |
| By signing here, I declare under penalty of perjury that the information on this st | atement and in any | v attachments is true a | and correct. |
| | atomont and in an | y attaorimonto lo trao a | Tid College. |
| /s/ Dixie Hill | | | |
| Signature of Debtor 1 - Dixie Hill Sig | nature of Debtor 2 | | |
| Date 03/28/2019 Da | | | |
| If you checked line 14a, do NOT fill out or file Form 122A–2. | MM / DD / YYYY | | |
| If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form. | MM / DD / YYYY | | |

| Fill in this information to identify your case: | | | | |
|---|---------------------|----------------------------------|-----------|--|
| Debtor 1 | Dixie | | Hill | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court fo | or the: Eastern District of Cali | ifornia | |
| Case number | (If known) | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | Your ass Value of | sets what you own |
|--|----------------------|----------------------|
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 32,430.09 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 32,430.09 |
| art 2: Summarize Your Liabilities | | |
| | Your lia | abilities you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ | 10,922.59 |
| Your total liabilities | \$ | 10,922.59 |
| art 3: Summarize Your Income and Expenses | | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,321.68 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,317.00 |

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| Debtor | 1 | |
|--------|---|--|

Dixie Hill
First Name Middle Name Last Name

Case number (if known)_____

| Part 4 | Answer These | Questions for | Administrative and | d Statistical Records |
|--------|----------------|---------------|--|-----------------------|
| | Aliowel Hilese | WACSHOIIS IOI | Auiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii | u Statisticai Neculus |

| 6. | Are you filing | for bankruptcy | under Chapters | 7, 11, or 13? |
|----|----------------|----------------|----------------|---------------|
|----|----------------|----------------|----------------|---------------|

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 830.68

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim |
|--|-------------|
| From Part 4 on Schedule E/F, copy the following: | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 |
| 9d. Student loans. (Copy line 6f.) | \$673.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$0.00 |
| 9g. Total. Add lines 9a through 9f. | \$673.00 |

| Fill in this information to identify your case and this filing: | | | | |
|---|---------------------|------------------------------------|-------------------|--|
| Debtor 1 | Dixie First Name | Middle Name | Hill Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court fo | or the: Eastern District of Califo | ornia | |
| Case number | | | _ | |
| | | | | |

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| - 1 | o. Go to Part 2. | | | |
|-------------|--|---|---|-------------------------------|
| - Y€ | es. Where is the property? | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured cla the amount of any secure Creditors Who Have Clain | d claims on <i>Śchedule D</i> |
| | Street address, if available, or other description | □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property | Current value of the entire property? | portion you own? \$ |
| | City State ZIP Code | ☐ Timeshare ☐ Other Who has an interest in the property? Check one. | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | County | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | Check if this is co | mmunity property |
| | own or have more than one, list here: | what is the property? Check all that apply. Single-family home | Do not deduct secured clathe amount of any secure | d claims on Schedule L |
| 1.2. | Street address, if available, or other description | □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land | Current value of the entire property? | |
| | City State ZIP Code | ☐ Investment property ☐ Timeshare | Describe the nature of interest (such as fee | simple, tenancy by |
| | · | Other | the entireties, or a life | e estate), if known. |
| | County | Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only | ☐ Check if this is co | |

Doc 1

| led 03/28/1 | .9 | | | Case 19-21911 | |
|-------------|------------|-------------|-----------|---------------|------------------------|
| Debtor 1 | Dixie | | Hill | | Case number (if known) |
| | First Name | Middle Name | Last Name | | - |

| 1.3. | Street address, if available | o or other description | What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on <i>Schedule D:</i> |
|---------------------------------|--|---|---|---|---|
| | Street address, if available | e, or other description | Condominium or cooperative Manufactured or mobile home | Current value of the entire property? | Current value of the portion you own? |
| | | | Land | \$ | \$ |
| | City | State ZIP Code | ☐ Investment property☐ Timeshare☐ Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | | | Who has an interest in the property? Check one. | | |
| | County | | Debtor 1 only | | |
| | County | | Debtor 2 only | ☐ Check if this is co | mmunity property |
| | | | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | (see instructions) | minumity property |
| | | | Other information you wish to add about this ite property identification number: | em, such as local | |
| | | - | ll of your entries from Part 1, including any entries | _ | \$0.00 |
| you I | have attached for Part | 1. Write that number | here. | ····································· | |
| Part 2: | Describe Your \ | /ehicles | | | |
| Do you you own | own, lease, or have leg that someone else drive , vans, trucks, tractors, | gal or equitable intere | st in any vehicles, whether they are registered or a le, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. | and Unexpired Leases. Do not deduct secured cla | nims or exemptions. Put |
| Do you oyou own 3. Cars N Y | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo | yal or equitable interects. If you lease a vehicles, sport utility vehicles Kia Soul | le, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. | and Unexpired Leases. | aims or exemptions. Put d claims on <i>Schedule D:</i> |
| Do you oyou own 3. Cars N Y | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo es Make: | al or equitable intereses. If you lease a vehicles, sport utility vehicles Kia Soul 2014 | le, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secure Creditors Who Have Clair | nims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the |
| Do you oyou own 3. Cars N Y | own, lease, or have leg that someone else drive, vans, trucks, tractors, lo es Make: Model: | yal or equitable interects. If you lease a vehicles, sport utility vehicles Kia Soul | le, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clair | nims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> . |
| Do you oyou own 3. Cars N Y | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo les Make: Model: Year: Approximate mileage: Other information: | Kia Soul 2014 37,700 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured clathe amount of any secure Creditors Who Have Clair | nims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the |
| Do you oyou own 3. Cars N Y | own, lease, or have leg that someone else drive, vans, trucks, tractors, lo es Make: Model: Year: Approximate mileage: | Kia Soul 2014 37,700 | le, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own? |
| Do you own 3. Cars N Y 3.1. | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo les Make: Model: Year: Approximate mileage: Other information: | Kia Soul 2014 37,700 n 4D / Clean Good Condition | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the portion you own? |
| Do you own 3. Cars N Y 3.1. | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo fes Make: Model: Year: Approximate mileage: Other information: 2014 Kia Soul Wagor Title / 37,700 Miles / 10 own or have more than | Kia Soul 2014 37,700 n 4D / Clean Good Condition | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 10,000.00 | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 10,000.00 |
| Do you own 3. Cars N Y 3.1. | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo fes Make: Model: Year: Approximate mileage: Other information: 2014 Kia Soul Wagor Title / 37,700 Miles / 10 own or have more than | Kia Soul 2014 37,700 n 4D / Clean Good Condition | Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 10,000.00 | aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 10,000.00 aims or exemptions. Put d claims on Schedule D: |
| Do you own 3. Cars N Y 3.1. | own, lease, or have leg that someone else driver, vans, trucks, tractors, lower and the second of th | Kia Soul 2014 37,700 n 4D / Clean Good Condition | Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 10,000.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the | aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 10,000.00 aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the |
| Do you own 3. Cars N Y 3.1. | own, lease, or have leg that someone else drive , vans, trucks, tractors, lo les Make: Model: Year: Approximate mileage: Other information: 2014 Kia Soul Wagon Title / 37,700 Miles / I own or have more than Make: Model: | Kia Soul 2014 37,700 n 4D / Clean Good Condition | Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 10,000.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair | aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 10,000.00 aims or exemptions. Put d claims on Schedule D: ns Secured by Property. |

Filed 03/28/19 Dixie

Case 19-21911

Doc 1

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|---|----|-----|-----|---|
| ı | Эe | bto | r 1 | |

Hill

Case number (if known)_

| 3.3. | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | ims or exemptions. Put |
|------|---------------------------------------|---|--|---------------------------------------|
| | Model: | Debtor 1 only | the amount of any secure Creditors Who Have Clain | |
| | Year: | Debtor 2 only | | |
| | | Debtor 1 and Debtor 2 only | entire property? | Current value of the portion you own? |
| | Approximate mileage: | At least one of the debtors and another | | , |
| | Other information: | | \$ | \$ |
| | | ☐ Check if this is community property (see instructions) | Ψ | Ψ |
| | | , | | |
| 3.4. | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | |
| | Model: | Debtor 1 only | the amount of any secure Creditors Who Have Clain | |
| | Year: | Debtor 2 only | | |
| | | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Approximate mileage: | At least one of the debtors and another | ciiiic proporty : | portion you on |
| | Other information: | | \$ | \$ |
| | | ☐ Check if this is community property (see instructions) | Ψ | Ψ |
| | | med deterior | | |
| | | | | |
| 4.1. | Make: Model: Year: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ | d claims on <i>Schedule D:</i> |
| • | · | Who has an interest in the property? Check one. | Do not doduct occured ale | ima ar avamentiana. Dut |
| 4.2. | Make: | Debtor 1 only | Do not deduct secured cla the amount of any secure | d claims on Schedule D: |
| | Model: | Debtor 2 only | Creditors Who Have Clair | ns Secured by Property. |
| | Year: | Debtor 1 and Debtor 2 only | Current value of the | Current value of the |
| | Other information: | At least one of the debtors and another | entire property? | portion you own? |
| | | | ¢ | \$ |
| | | Check if this is community property (see | \$ | Φ |
| | | instructions) | | |
| | | for all of your entries from Part 2, including any entries | _ | \$10,000.00 |
| | | | | |
| | | | | |

Debtor 1

Dixie

.....

Hill

Case number (if known)_

art 3: Describe Your Personal and Household Items

| Do | you own or have any le | gal or equitable interest in any of the following items? | Current va portion yo Do not dedu or exemption | u own? ct secured claims |
|-----|---|---|---|--------------------------|
| 6. | Household goods and t | furnishings | | |
| | Examples: Major applian | ces, furniture, linens, china, kitchenware | | |
| | ☐ No ☐ Yes. Describe | Household Goods | \$ | 2,000.00 |
| | | | | |
| 7. | | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games | | |
| | Yes. Describe | Electronics | \$ | 500.00 |
| 8. | Collectibles of value | | | |
| | stamp, coin, o | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles | | |
| | ☐ No ☐ Yes. Describe | Books and Pictures | \$ | 250.00 |
| 9. | | nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments | _ | |
| | ☐ No ☐ Yes. Describe | Sports and Hobby Equipment | \$ | 150.00 |
| 10. | • | shotguns, ammunition, and related equipment | | |
| | ✓ No ✓ Yes. Describe | | \$ | 0.00 |
| 11. | Clothes Examples: Everyday clot | hes, furs, leather coats, designer wear, shoes, accessories | | |
| | Yes. Describe | Wearing Apparel | \$ | 750.00 |
| 12. | Jewelry Examples: Everyday jew gold, silver ☐ No | elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | | |
| | Yes. Describe | Jewelry | \$ | 1,000.00 |
| 13. | Non-farm animals Examples: Dogs, cats, bi | rds, horses | | |
| | ☐ No ☐ Yes. Describe | Yorkie | \$ | 350.00 |
| 14. | Any other personal and | household items you did not already list, including any health aids you did not list | | |
| | ✓ No Yes. Give specific information | | \$ | 0.00 |
| 15. | Add the dollar value of | all of your entries from Part 3, including any entries for pages you have attached mber here | \$ | 5,000.00 |
| | rait of thine that hu | | | |

Debtor 1

Dixie First Name

Hill

Case number (if known)_

| D14 | B | V | | |
|---------|----------|----------|-----------|--------|
| Part 4: | Describe | Your | Financiai | Assets |

| Do you own or have | any legal or equitable interest in | any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|---|--|--|--|
| 16. Cash <i>Examples:</i> Money | you have in your wallet, in your hon | ne, in a safe deposit box, and on hand when you file your petiti | on |
| □ No | | | |
| ∠ Yes | | Cash: | \$ 10.00 |
| and oth | ng, savings, or other financial accou | ints; certificates of deposit; shares in credit unions, brokerage ultiple accounts with the same institution, list each. | nouses, |
| ☐ No ☑ Yes | | Institution name: | |
| | 17.1. Checking account: | Safe Credit Union Checking Account8692(09) | \$89.87 |
| | 17.2. Checking account: | | \$ |
| | 17.3. Savings account: | Safe Credit Union Savings Account8692(00) | \$ 0.00 |
| | 17.4. Savings account: | | |
| | 17.5. Certificates of deposit: | | \$ |
| | 17.6. Other financial account: | | \$ \$ |
| | 17.7. Other financial account: | | \$ |
| | 17.8. Other financial account: | | \$ |
| | 17.9. Other financial account: | | |
| | | | |
| Examples: Bond fu | nds, or publicly traded stocks inds, investment accounts with brok | erage firms, money market accounts | |
| ☑ No ☐ Yes | Institution or issuer name: | | |
| | | | \$ |
| | | | |
| | | | \$ |
| | | | |
| | | | |
| | | rated and unincorporated businesses, including an interes | st in |
| | ed stock and interests in incorpo hip, and joint venture Name of entity: | rated and unincorporated businesses, including an interest % of owners! | |
| an LLC, partnersh ☑ No ☑ Yes. Give spec | hip, and joint venture Name of entity: ific | % of owners | nip: |
| an LLC, partnersl ☑ No | hip, and joint venture Name of entity: ific out | % of owners | nip: |

Case 19-21911

Doc 1

Debtor 1

| Dixie | |
|------------|--|
| First Name | |

Hill Last Name

| | | | _ |
|--|------------|--------|------|
| | (if known) | number | Caca |
| | (if known) | number | Case |

| 20 Government and corne | rate bonds and other negotiable and non-negotiable instrumer | nte |
|---------------------------|---|--|
| | clude personal checks, cashiers' checks, promissory notes, and m | |
| | nts are those you cannot transfer to someone by signing or delivering | |
| ☑ No | | |
| Yes. Give specific | Issuer name: | |
| information about them | | \$ |
| tiloiii | | |
| | | |
| | | · |
| 21. Retirement or pension | accounts | |
| | A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other p | pension or profit-sharing plans |
| ☑ No | | |
| Yes. List each | | |
| account separately. | Type of account: Institution name: | |
| | 401(k) or similar plan: | \$ |
| | Pension plan: | <u> </u> |
| | IRA: | \$ |
| | | • • • • • • • • • • • • • • • • • • • |
| | Retirement account: | |
| | Keogh: | <u> </u> |
| | Additional account: | \$ |
| | Additional account: | \$ |
| | deposits you have made so that you may continue service or use fr ith landlords, prepaid rent, public utilities (electric, gas, water), tele | |
| ☑ No | | |
| ☐ Yes | Institution name or individual: | |
| | Electric: | \$ |
| | Gas: | |
| | Heating oil: | |
| | Security deposit on rental unit: | ************************************** |
| | Prepaid rent: | \$ |
| | Telephone: | 5 |
| | Water: | |
| | Rented furniture: | \$ |
| | | \$ |
| | Other: | \$ |
| | | |
| | a periodic payment of money to you, either for life or for a number | of years) |
| ☑ No | | |
| ☐ Yes | Issuer name and description: | |
| | | \$ |
| | | \$ |
| | | <u></u> |

Case 19-21911

Doc 1

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|---|----|-----|------|---|
| | Δ۵ | htc | ۰r 1 | |

 Hill

Case number (if known)

| | unt in a qualified ABLE program, or under a qualified stat | te tuition program. | |
|--|---|--------------------------|--|
| 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b |)(1). | | |
| | ame and description. Separately file the records of any interes | oto 11 II S.C. S.E21(a): | |
| iiisutuuon n | arrie and description. Separately life the records of any interes | sis.11 0.3.0. g 321(c). | • |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 25 Tructo equitable or future interests in pr | operty (other than anything listed in line 1), and rights or | nowara | |
| exercisable for your benefit | operty (other than anything listed in line 1), and rights of | powers | |
| ☑ No | | | |
| ☐ Yes. Give specific | | | • |
| information about them | | | \$ |
| 26. Patents, copyrights, trademarks, trade se | ecrets, and other intellectual property | | |
| • | s, proceeds from royalties and licensing agreements | | |
| ☑ No | | | |
| Yes. Give specific information about them | | | \$ |
| momadon about alom | | | |
| 27. Licenses, franchises, and other general | | | |
| Examples: Building permits, exclusive licens | ses, cooperative association holdings, liquor licenses, profess | sional licenses | |
| ☑ No | | | |
| Yes. Give specific information about them | | | \$ |
| | | | |
| Money or property owed to you? | | | Current value of the |
| | | | portion you own? Do not deduct secured |
| | | | claims or exemptions. |
| 28. Tax refunds owed to you | | | |
| ☑ No | | | |
| Yes. Give specific information about them, including whether | | Federal: \$ | <u> </u> |
| you already filed the returns and the tax years | | State: \$ | <u> </u> |
| and the tax years | | Local: \$ | <u> </u> |
| _ | | | |
| 29. Family support | annual cumpert shild cumpert maintanance diverse settlemen | ant proporty cottlemen | . |
| ✓ No | spousal support, child support, maintenance, divorce settleme | ent, property settlemen | ι |
| Yes. Give specific information | | | |
| | | Alimony: | \$ |
| | | Maintenance: | \$ |
| | | Support: | \$ |
| | | Divorce settlement: | \$ \$ |
| L | | Property settlement: | Φ |
| 30. Other amounts someone owes you Examples: Unpaid wages, disability insuran | ce payments, disability benefits, sick pay, vacation pay, work | cers' compensation | |
| Social Security benefits; unpaid | loans you made to someone else | toro componidation, | |
| ☑ No | | | |
| ☐ Yes. Give specific information | | | \$ |
| | | | |

Filed 03/28/19_

Case 19-21911

Doc 1

Debtor 1

Dixie

Hill

Case number (if known)_

| 31. Interests in insurance policies | | | |
|---|---|--|------------------------------|
| Examples: Health, disability, or life in | nsurance; health savings account (HS | A); credit, homeowner's, or renter's insurance | |
| ☑ No | | | |
| Yes. Name the insurance compa of each policy and list its va | | Beneficiary: | Surrender or refund value: |
| . , | | | \$ |
| | | | ф. |
| | | | \$ |
| | | | \$ |
| 32. Any interest in property that is du | ie vou from someone who has died | | |
| | trust, expect proceeds from a life insur | rance policy, or are currently entitled to receive | |
| ☑ No | | | |
| Yes. Give specific information | | | |
| | | | \$ |
| | | | <u></u> |
| 33. Claims against third parties, whet | | | |
| Examples: Accidents, employment of | disputes, insurance claims, or rights to | sue | |
| ✓ No | | | _ |
| Yes. Describe each claim | | | |
| | | | \$ |
| 34. Other contingent and unliquidated | d claims of every nature, including | counterclaims of the debtor and rights | |
| to set off claims | - | - | |
| ☑ No | | | _ |
| Yes. Describe each claim | | | |
| | | | \$ |
| | | | |
| os A financial constants and did not | dan de la | | |
| 35. Any financial assets you did not a | iready list | | |
| ☐ No | | | |
| Yes. Give specific information | Non-Filing Spouse's 50% | 6 of Real Estate Sale | \$17,330.22 |
| | | | |
| 36. Add the dollar value of all of your | entries from Part / including any | entries for pages you have attached | |
| _ | | + | s 17,430.09 |
| | | | ' |
| | | | |
| | | | |
| Part 5: Describe Any Busin | ess-Related Property You (| Own or Have an Interest In. List any r | eal estate in Part 1. |
| | | - | |
| 37. Do you own or have any legal or e | equitable interest in any business-re | elated property? | |
| No. Go to Part 6. | | | |
| ☐ Yes. Go to line 38. | | | |
| | | | Current value of the |
| | | | portion you own? |
| | | | Do not deduct secured claims |
| | | | or exemptions. |
| 38. Accounts receivable or commissi | ons you already earned | | |
| ☑ No | | | |
| Yes. Describe | | | |
| Tes. Describe | | | \$ |
| | | | |
| 39. Office equipment, furnishings, an | | pohinos rugo tolophonos docko cheiro electronia dell' | |
| , , , | sonware, moderns, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, electronic devices | • |
| No | | | |
| Yes. Describe | | | \$ |
| | | | |

Dixie Hill Debtor 1 Case number (if known) 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ✓ No ☐ Yes. Describe.... 41. Inventory ☑ No ☐ Yes. Describe..... 42. Interests in partnerships or joint ventures ☑ No. ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☑ No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list ■ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes.....

Doc 1

Debtor 1

Dixie

Hill

| C-0 | 00 011 | mhor | |
|-----|--------|------|--|

| 48. Crops—either growing or harvested | | |
|--|--|----------------------|
| ☐ No ☐ Yes. Give specific information | | \$ |
| 49. Farm and fishing equipment, implements, machinery, fixture No Yes | | |
| | | \$ |
| 50. Farm and fishing supplies, chemicals, and feed | | |
| ☐ No ☐ Yes | | |
| | | \$ |
| 51. Any farm- and commercial fishing-related property you did r | not already list | _ |
| Yes. Give specific information | | \$ |
| 52. Add the dollar value of all of your entries from Part 6, includ for Part 6. Write that number here | | \$0.00 |
| | | |
| Part 7: Describe All Property You Own or Have | an Interest in That You Did Not List Above | |
| 53. Do you have other property of any kind you did not already | list? | |
| Examples: Season tickets, country club membership No | | |
| Yes. Give specific information | | \$ \$ |
| momadon | | \$ |
| 54. Add the dollar value of all of your entries from Part 7. Write t | that number here | \$0.00 |
| , | | |
| Part 8: List the Totals of Each Part of this Form | 1 | |
| 55. Part 1: Total real estate, line 2 | | \$ |
| 56. Part 2: Total vehicles, line 5 | \$10,000.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$5,000.00 | |
| 58. Part 4: Total financial assets, line 36 | \$17,430.09 | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | |
| 61. Part 7: Total other property not listed, line 54 | + \$0.00 | |
| 62. Total personal property. Add lines 56 through 61 | \$32,430.09 Copy personal property total | + \$32,430.09 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$ 32,430.09 |
| 55. 15.3. Or all proporty on obligation PLD. Add line 60 + lille 02 | | * |

| Fill in this information to identify your case: | | | | | | |
|--|------------|-------------|-----------|--|--|--|
| Debtor 1 | Dixie | | Hill | | | |
| Dobtor 1 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: Eastern District of California | | | | | | |
| Case number (If known) | | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | ming federal exemptions. 11 U | | pt, fill in the information below. | |
|-------------------------|---|--------------------------------------|---|------------------------------------|
| | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: | 2014 Kia Soul Wagon 4D | \$ <u>10,000.00</u> | ☑ \$5,350.00 | C.C.P. § 703.140(b)(2) |
| Line from Schedule A/B: | 3.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | 2014 Kia Soul Wagon 4D | \$_10,000.00 | ☑ \$ 4,650.00 | C.C.P. § 703.140(b)(5) |
| Line from Schedule A/B: | 3.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Household Goods | \$ <u>2,000.00</u> | 2 \$ 2,000.00 | C.C.P. § 703.140(b)(3) |
| Line from Schedule A/B: | 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| | | | | |

Case 19-21911

Doc 1

Debtor 1

Dixie

Middle Name

Hill Last Name

Case number (if known)_

Part 2: Additional Page

| | on of the property and line /B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--|--|--------------------------------------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: Line from | Electronics 7 | \$ 500.00 | \$ 500.00 \\ 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Schedule A/B: Brief description: Line from Schedule A/B: | Books and Pictures 8 | \$\$ | \$ 250.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Brief description: Line from Schedule A/B: | Sports and Hobby Equipment | \$150.00 | ■ 150.00 □ 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(3) |
| Brief description: Line from Schedule A/B: | Wearing Appael 11 | \$750.00 | ▼ \$ 750.00 □ 100% of fair market value, up to any applicable statutory limit | C.C.P.§ 703.140(b)(3) |
| Brief description: Line from Schedule A/B: | Jewelry 12 | \$1,000.00 | ■ 1,000.00 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(4) |
| Brief description: Line from Schedule A/B: | 1 Yorkie 13 | \$750.00 | \$350.00 \[\begin{align*} | C.C.P. § 703.140(b)(3) |
| Brief description: Line from Schedule A/B: | Cash on Hand 16 | \$10.00 | \$10.00_ 100% of fair market value, up to any applicable statutory limit | C.C.P. § 703.140(b)(5) |
| Brief description: Line from Schedule A/B: | Safe Credit Union Checking Account8692(09) | \$89.87 | \$89.87 \[\begin{align*} 100% of fair market value, up to any applicable statutory limit \] | C.C.P. § 703.140(b)(5) |
| Brief description: Line from | Safe Credit Union Savings Account8692(00) | \$0.00 | \$ 0.00 100% of fair market value, up to any applicable statutory limit | C.C.P.§ 703.140(b)(5) |
| Schedule A/B: Brief description: Line from Schedule A/B: | Non-Filing Spouse's 50% of Real Estate Sale | \$17,330.22 | \$_17,330.22 \[\begin{align*} \begi | C.C.P. § 703.140(b)(5) |
| Brief description: Line from Schedule A/B: | | \$ | \$ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | | \$ | \$ \$ 100% of fair market value, up to any applicable statutory limit | |

| Fill in this information to identify your case: | | | | | | | |
|--|------------|-------------|-----------|--|--|--|--|
| Debtor 1 | Dixie | Hill | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Eastern District of California | | | | | | | |
| Case number (If known) | | | | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ✓ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| Part 1: List All Secured Claims | | | | |
|--|---|---|---|-----------------------------------|
| for each claim. If more than one creditor has much as possible, list the claims in alpl | more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | Contingent Unliquidated Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At lease one of the debtors and another □ Check if this claim relates to a community debt | □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) | - | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2.2 | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name | | 1 | | |
| Number Street | - | | | |
| City State ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt | □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) | - | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Add the dollar value of your entries in | Column A on this page. Write that number here: | \$ | | |

| 00/20/10 | | | Odoc 10 Zioii | | | | |
|--|------------|-------------|---------------|--|--|--|--|
| Fill in this information to identify your case: | | | | | | | |
| Debtor 1 | Dixie | | Hill | | | | |
| _ | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Eastern District of California | | | | | | | |
| Case number (If known) | | | | | | | |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| Pa | art 1: List All of Your PRIORITY Unsecur | ed Claims | | | |
|-----|--|---|------------------------------------|-------------------------------|-----------------------------|
| 1. | Do any creditors have priority unsecured claim No. Go to Part 2. ☐ Yes. | s against you? | | | |
| 2. | each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the | reditor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's neart 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.) | at claim here a ame. If you hav | nd show both e more than t | priority and wo priority |
| | 7 | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| | Number Street | When was the debt incurred? | | | |
| | City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | | |
| 2.2 | Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| | Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | | |



| 14 | LIST All of Your NUNPRIO | KIIT UN | secured Claims | | | | |
|-----|--|-----------------------------|-----------------------|---|-------------------------------|------------|------------|
| 3. | Do any creditors have nonpriority u ☐ No. You have nothing to report in t ☑ Yes | | • • | | | | |
| 4. | List all of your nonpriority unsecure nonpriority unsecured claim, list the cre included in Part 1. If more than one cre claims fill out the Continuation Page of | editor sepa editor holds | rately for each clain | n. For each claim listed, identify wha | t type of claim it is. Do not | list claim | is already |
| | | | | | | Total c | claim |
| 4.1 | First Premier Bank | | | | 5 7 1 0 | | |
| | Nonpriority Creditor's Name | | | Last 4 digits of account number | | \$ | 814.00 |
| | 3820 North Louise Ave. | | | When was the debt incurred? | 06/2018 | | |
| | Sioux Falls City | SD State | 57107 ZIP Code | As of the date you file, the claim | is: Check all that apply. | | |
| | Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only | | | ☐ Contingent☐ Unliquidated☐ Disputed☐ | | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecu | red claim: | | |
| | ☐ At least one of the debtors and another | er | | ☐ Student loans | | | |
| | ☐ Check if this claim is for a comm | unity debt | | Obligations arising out of a separathat you did not report as priority | | | |
| | Is the claim subject to offset? ✓ No | | | Debts to pension or profit-sharing Other. Specify Credit Card | | | |
| | Yes | | | — Other, openly | | | |
| 4.2 | 1 | | | Last 4 digits of account number | 2 1 0 2 | \$ | 182.00 |
| | Lack Nonpriority Creditor's Name | | | When was the debt incurred? | 06/2018 | - | |
| | P.O. Box 3115 | | | | | | |
| | Milwaukee | WI | 53201 | As of the date you file, the claim | is: Check all that apply. | | |
| | City | State | ZIP Code | ☐ Contingent☐ Unliquidated | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | | ☐ Unliquidated☐ Disputed | | | |
| | Debtor 2 only | | | | | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecu | red claim: | | |
| | At least one of the debtors and another | er | | Student loans | | | |
| | ☐ Check if this claim is for a comm | unity debt | | Obligations arising out of a separathat you did not report as priority | | | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing | | | |
| | ☑ No ☐ Yes | | | ☑ Other. Specify Charge Care | <u>u</u> | | |
| 4.3 | | | | | | | |
| | Nelnet Nonpriority Creditor's Name | | | Last 4 digits of account number | | \$ | 362.00 |
| | 3015 South Parker Road, Sui | ite #400 | | When was the debt incurred? | 09/2005 | | |
| | Aurora City | CO | 80201 ZIP Code | As of the date you file, the claim | is: Check all that apply. | | |
| | Who incurred the debt? Check one. | | | Contingent | | | |
| | Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | | UnliquidatedDisputed | | | |
| | | | | Type of NONDDIODITY | rad alaimi | | |
| | At least one of the debtors and another | er | | Type of NONPRIORITY unsecu | reu Ciaim: | | |
| | ☐ Check if this claim is for a comm | unity debt | | Student loansObligations arising out of a separ. | ation agreement or divorce | | |
| | Is the claim subject to offset? | , | | that you did not report as priority | claims | | |
| | ☑ No | | | □ Debts to pension or profit-sharing□ Other. Specify | • | | |
| | ☐ Yes | | | — Outer. Specify | | | |
| 1 | | | | | | | |

Official Form 106E/F

Case number (if known)

Part 2:



| Afte | er listing any entries on this page, n | umber the | m beginning with | n 4.4, followed by 4.5, and so forth. | Total claim |
|------|---|------------|------------------|---|------------------|
| 4.4 | Nelnet | | | Last 4 digits of account number 8 4 5 | \$ <u>311.00</u> |
| | Nonpriority Creditor's Name 3015 South Parker Road, Sui | te #400 | | When was the debt incurred? 09/2005 | |
| | Number Street Aurora | СО | 80201 | As of the date you file, the claim is: Check all that apply. | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only | | | · · | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and anothe | r | | Student loans Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a commu | unity debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Other. Specify | |
| | ☑ No ☐ Yes | | | | |
| 4.5 | | | | Last 4 digits of account number 7 3 5 0 | \$ 86.00 |
| | Verizon Wireless Nonpriority Creditor's Name | | | | φ <u> </u> |
| | P.O. Box 650051 | | | When was the debt incurred? 03/2015 | |
| | Dallas | TX | 75265 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | ☐ Unliquidated ☐ Disputed | |
| | ☑ Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe | | | Student loans | |
| | | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a commu | unity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | ✓ Other. Specify Telecommunications Bill | |
| | ☐ No ☐ Yes | | | | |
| 4.6 | Diversified Consultants | | | Last 4 digits of account number 7 4 7 4 | \$180.00 |
| | Nonpriority Creditor's Name | | | — When was the debt incurred? 09/2018 | |
| | P.O. Box 551268 Number Street | | | | |
| | Jacksonville | FL | 32255 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | ☐ Contingent☐ Unliquidated | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 1 only | | | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and anothe | r | | Student loans | |
| | | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | ☑ Other. Specify Collection Agency | |
| | ☐ Yes | | | | |

Part 2:

| Aft | er listing any entries on this page, n | umber the | em beginning with | n 4.4, followed by 4.5, and so forth. | Total claim |
|-----|--|-------------|-------------------|---|-------------|
| 4.7 | IQ Date International, Inc. | | | Last 4 digits of account number 3 8 0 6 | \$ 6,149.00 |
| | Nonpriority Creditor's Name P.O. Box 340 | | | When was the debt incurred? <u>02/2016</u> | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Bothell City | WA State | 98041 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. Debtor 1 only | State | | Unliquidated Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | ☐ Student loans | |
| | At least one of the debtors and anothe | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a commu | unity debt | | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? ☑ No | | | ✓ Other. Specify Collection Agency | |
| | ☑ No ☐ Yes | | | | |
| 4.8 | Midland Funding, LLC | | | Last 4 digits of account number 6 9 1 2 | \$ 894.00 |
| | Nonpriority Creditor's Name | | | — When was the debt incurred? 03/2016 | |
| | 2365 Northside Drive, Suite #300 | | | When was the dept incurred? | |
| | San Diego | CA | 92108 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe | _ | | Student loans | |
| | | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a commu | unity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | ☑ Other. Specify Collection Agency | |
| | ☑ No ☐ Yes | | | | |
| 4.9 | u res | | | | \$ 250.00 |
| | Target | | | Last 4 digits of account number $X X X X$ | \$ 250.00 |
| | Nonpriority Creditor's Name | | | — When was the debt incurred? Unknown | |
| | P.O. Box 673 Number Street | | | — — — — — — — — — — — — — — — — — — — | |
| | Minneapolis | MN | 55440 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | Unliquidated | |
| | Debtor 1 only | | | ☐ Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | | | Student loans | |
| | | | | Obligations arising out of a separation agreement or divorce that | |
| | | | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | | | Other. Specify Charge Card | |
| | ☑ No | | | | |
| | ☐ Yes | | | | |

Part 2:

Middle Name

Hill Last Name

| After listing any | entries on this page, nun | nber the | m beginning with | 4.4, followed by 4.5, and so forth. | Total clair |
|-------------------------------|-------------------------------------|----------|------------------|---|------------------|
| .10 Check int | | | | Last 4 digits of account number X X X X | \$ <u>300.</u> |
| Nonpriority Cred 201 Keith | tor's Name Street SW, Suite #80 | | | When was the debt incurred? Unknown | |
| Number Cleveland | Street | TN | 37311 | As of the date you file, the claim is: Check all that apply. | |
| City | | State | ZIP Code | Contingent Unliquidated | |
| Debtor 1 o | | | | ☐ Disputed | |
| Debtor 2 o | nly | | | Type of NONPRIORITY unsecured claim: | |
| | nd Debtor 2 only | | | ☐ Student loans | |
| | e of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | his claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim | subject to offset? | | | ✓ Other. Specify Personal Loan | |
| ☑ No ☐ Yes | | | | | |
| | iding, LLC | | | Last 4 digits of account number 7 4 3 8 | \$ 1,137. |
| C/O Resur Nonpriority Cred | gent Capital Services tor's Name | | | | \$ <u>1,107.</u> |
| P.O. Box | | | | When was the debt incurred? $02/2016$ | |
| Number Greenville | Street | SC | 29603 | As of the date you file, the claim is: Check all that apply. | |
| City | | State | ZIP Code | Contingent | |
| Who incurre | d the debt? Check one. | | | Unliquidated | |
| Debtor 1 c | | | | ☐ Disputed | |
| Debtor 2 c | = | | | Type of NONPRIORITY unsecured claim: | |
| | nd Debtor 2 only | | | ☐ Student loans | |
| | e of the debtors and another | | | Obligations arising out of a separation agreement or divorce that | |
| Check if | his claim is for a commun | ity debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | subject to offset? | | | ☐ Other Specify Collection Agency | |
| ☑ No ☐ Yes | | | | | |
| 12 Yes | | | | | 0. |
| Travis Cre | dit Union | | | Last 4 digits of account number 6 6 6 0 | \$0. |
| Nonpriority Cred | | | | When was the debt incurred? 06/2015 | |
| 1 Travis V | /ay Street | | | - When was the debt incurred? | |
| Vacaville | | CA | 95687 | As of the date you file, the claim is: Check all that apply. | |
| City | | State | ZIP Code | Contingent | |
| Who incurre | d the debt? Check one. | | | ☐ Unliquidated ☐ Disputed | |
| ☑ Debtor 1 c | nly | | | Disputed | |
| Debtor 2 o | - | | | Type of NONPRIORITY unsecured claim: | |
| _ | nd Debtor 2 only | | | ☐ Student loans | |
| | e of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ☐ Check if | his claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | subject to offset? | | | Other Specify Auto Repossession | |
| ☑ No | | | | | |
| Yes | | | | | |

Case number (if known)

Part 2:

| Credence | | | Last 4 digits of account number 8 4 2 1 | s 25 |
|--|------------------|----------|---|------|
| Nonpriority Creditor's Name | | | When was the debt incurred? 2018 | Ψ |
| 17000 Dallas Parkway | , Suite #204 | | when was the dept incurred: | |
| Dallas | TX | 75248 | As of the date you file, the claim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | |
| Who incurred the debt? Chec | ek ono | | Unliquidated | |
| Debtor 1 only | ck one. | | ☐ Disputed | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | | | ☐ Student loans | |
| At least one of the debtors a | nd another | | Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for | a community debt | | you did not report as priority claims | |
| s the claim subject to offset | - | | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Card | |
| No | • | | other. Specify Offarge Oard | |
| Yes | | | | |
| | | | Last 4 digits of account number | \$ |
| Nonpriority Creditor's Name | | | | |
| | | | When was the debt incurred? | |
| Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | |
| | | | ☐ Unliquidated | |
| Who incurred the debt? Chec | ck one. | | ☐ Disputed | |
| Debtor 1 only | | | Time of NONDRIGRITY unacquired claims | |
| Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors a | nd another | | ☐ Student loans | |
| 7 Objects 16 46 to 16 to | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ☐ Check if this claim is for | - | | Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offset | ? | | Other. Specify | |
| □ No □ Yes | | | | |
| | | | Last 4 digits of account number | \$ |
| Nonpriority Creditor's Name | | | When was the debt incurred? | |
| Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| City | State | ZIP Code | Contingent | |
| Who incurred the debt? Chec | ck one. | | Unliquidated | |
| Debtor 1 only | | | ☐ Disputed | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | | | ☐ Student loans | |
| At least one of the debtors a | nd another | | Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for | a community debt | | you did not report as priority claims | |
| s the claim subject to offset | - | | ☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify | |
| | | | Utilet. Specify | |

Part 3:

List Others to Be Notified About a Debt That You Already Listed

| Same Size | example, if a collection agency 2, then list the collection agenc | is trying to y here. Simi lo not have | collect from yo larly, if you have | your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
|--|---|---|---------------------------------------|--|
| Mail Box 1200 San Francisco CA 94102 On which entry in Part 1 or Part 2 did you list the original creditor? | Bankruptcy Section | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street Mail Box 1200 San Francisco CA 94102 City State ZP Code Cast 4 digits of account number 8 4 2 5 5 5 5 5 5 5 5 5 | 50 United Nations Plaza | | | Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims |
| Mail Box 1200 | | | | |
| Solution Color C | Mail Box 1200 | | | a Fait 2. Creditors with Northfority Onsecured Grain |
| State Stat | Can Francisco | C A | 04102 | Last 4 digits of account number 8 4 2 5 |
| US Department of Education Name Bankruptcy Section 50 United Nations Plaza Namber Street Name Name Name Name Name Name Name Nam | | | | |
| Name Name Street Name Name Name Name Name Name Name Nam | , | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured | | | | , , |
| Mail Box 1200 San Francisco CA 94102 Calims | | aza | | Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims |
| Claims C | Number Street | | | ☑ Part 2: Creditors with Nonpriority Unsecured |
| Tate & Kirrlin Associates, Inc. Name | Mail Box 1200 | | | |
| Suite #240 | | | | Last 4 digits of account number 8 4 5 |
| Suite #240 Street | | Inc. | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street Str | | | | Line 4.11 of (Check and): D. Part 1: Craditors with Priority Unsecured Claims |
| Claims Langhorne PA 19047 State ZIP Code Code Name City State ZIP Code Claims Last 4 digits of account number 7 4 3 8 Con which entry in Part 1 or Part 2 did you list the original creditor? Last 4 digits of account number Part 2 creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Priority Unsecured Part 4: | | | | |
| State ZIP Code Code Check one): Part 1 or Part 2 did you list the original creditor? | | | | , , |
| Name Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 3: Creditors with Priority Unsecured Part 4: Creditors with Priority Unsecured Part 5: Creditors with Nonpriority Unsecured Part 6: Creditors with Priority Unsecured Part 7: Creditors with Nonpriority Unsecured Part 8: Creditors with Priority Unsecured Part 8: Creditors with Part 9: Part 8: Part | | | | Last 4 digits of account number 7 4 3 8 |
| Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 3: Creditors with Nonpriority Unsecured Part 4: Creditors with Nonpr | , | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Part 2: Creditors with Nonpriority Unsecue Claims Part 2: Creditors with Nonpriority Unsecue Claims Part 2: Creditors with Nonpriority Unsecue Claims Part 1 or Part 2 did you list the original creditor? | Name | | | |
| Claims Last 4 digits of account number | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Name Line of (Check one): Part 1: Creditors with Priority Unsecured | City | State | ZIP Code | Last 4 digits of account number |
| Line of (Check one): | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Part 2: Creditors with Nonpriority Unsecu Claims | Name | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): | Number Street | | | |
| On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): | | | | |
| On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Name On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Priority Unsecured Claims Last 4 digits of account number Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number | City | State | ZIP Code | Last 4 digits of account number |
| Name Number Street Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims City State State ZIP Code Last 4 digits of account number | · , | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Part 2: Creditors with Nonpriority Unsecuced Claims | Name | | | |
| Claims Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Last 4 digits of account number | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): □ Part 1: Creditors with Priority Unsecured □ Part 2: Creditors with Nonpriority Unsecu | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Part 2: Creditors with Nonpriority Unsecu | City | State | 7IP Code | Last 4 digits of account number |
| Number Street Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured ☐ Part 2: Creditors with Nonpriority Unsecu | | Julio | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street Part 2: Creditors with Nonpriority Unsecu Claims Last 4 digits of account number | Name | | | Line of (Check anal): Part 1: Craditors with Priority Unacoured Claims |
| | Number Street | | | ☐ Part 2: Creditors with Nonpriority Unsecured |
| City State 7IP Code Last 4 digits of account number | | | | |
| Oily State ZIF Code — — — — — | City | State | ZIP Code | Last 4 digits of account number |

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Hill

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim | |
|--------------|---|-----|-------------|-----------|
| Total claims | 6a. Domestic support obligations | 6a. | \$ | 0.00 |
| from Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ | 0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | |
| | | | Total claim | |
| Total claims | 6f. Student loans | 6f. | \$ | 673.00 |
| from Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | + \$ | 10,249.59 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | s | 10,922.59 |

Doc 1

| Fill in this information to identify your case: | | | | | | | |
|--|------------|-------------|-----------|--|--|--|--|
| Debtor | Dixie | Hill | | | | | |
| - | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse If filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Eastern District of California | | | | | | | |
| Case number (If known) | | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with who | om you l | nave the contract or lease | State what the contract or lease is for |
|-----|-----------|------------------|----------|----------------------------|---|
| 2.1 | | | | | |
| | Name | | | | - |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | - |
| 2.3 | | | | | |
| | Name | | | | - |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |
| 2.5 | | | | | |
| | Name | | | | - |
| | Number | Street | | | - |
| | City | | State | ZIP Code | - |

| Fill in this information to identify your case: | | | | | |
|--|---------------------|-------------|----------------|--|--|
| Debtor 1 | Dixie First Name | Middle Name | Hill Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: Eastern District of California | | | | | |
| Case number (If known) | | | - | | |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| 1. | Do you have any codebtors? (If No | f you are filing a joint case, do no | t list either spouse a | as a codebtor.) |
|----------|---|--------------------------------------|------------------------|--|
| | Yes | | | |
| 2. | | | | (Community property states and territories include shington, and Wisconsin.) |
| | ☐ No. Go to line 3. | | | |
| | Yes. Did your spouse, former | spouse, or legal equivalent live | with you at the time | ? |
| | □ No | | | |
| | Yes. In which community | state or territory did you live? | California | Fill in the name and current address of that person. |
| | William S. Terry | | | _ |
| | Name of your spouse, former sp | | | |
| | 8850 Elder Creek F | 10au | | - |
| | Sacramento | CA | 95828 | |
| | City | State | ZIP Code | - |
| | Schedule D (Official Form 106D Schedule E/F, or Schedule G to Column 1: Your codebtor | ,, | 106E/F), or Sched | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| 3.1 | <u> </u> | | | Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | Number Street | | | Schedule G, line |
| | City | State | ZIP Code | |
| 3.2 | | | | _ |
| | Name | | | Schedule D, line |
| | Niversham Charact | | | Schedule E/F, line |
| | Number Street | | | ☐ Schedule G, line |
| | City | State | ZIP Code | |
| 3.3 | | | | Schedule D, line |
| | Name | | | Schedule E/F, line |
| | Number Street | | | Schedule G, line |
| | | | | Goriedate O, line |
| | City | State | ZIP Code | |
| - | _ | | | 4 |

| | | Case 19-21911 | |
|--|---|--|--|
| Fill in this information to identify | your case: | | |
| Debtor 1 Dixie First Name | Maria N | Hill | |
| Debtor 2 | Middle Name | Last Name | |
| Spouse, if filing) First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | Eastern District of Californ | nia | |
| Case number | | - | Check if this is: |
| (If known) | | | ☐ An amended filing |
| | | | A supplement showing postpetition chapter 1 income as of the following date: |
| fficial Form 106I | | | MM / DD / YYYY |
| chedule I: You | ır İncomo | | 12/15 |
| e as complete and accurate as populate as populate as population. If you are separated and your spou | ou are married and not f use is not filing with you | iling jointly, and your spous , do not include information | ebtor 1 and Debtor 2), both are equally responsible for se is living with you, include information about your spo n about your spouse. If more space is needed, attach a case number (if known). Answer every question. |
| e as complete and accurate as pour polying correct information. If you are separated and your spour parate sheet to this form. On the part 1: Describe Employm | ou are married and not f use is not filing with you e top of any additional pa | iling jointly, and your spous , do not include information | se is living with you, include information about your spot n about your spouse. If more space is needed, attach a |
| e as complete and accurate as pouplying correct information. If yo you are separated and your spoupparate sheet to this form. On the | ou are married and not f use is not filing with you e top of any additional pa | iling jointly, and your spous , do not include information | se is living with you, include information about your spoun about your spouse. If more space is needed, attach a |
| e as complete and accurate as possibly in a correct information. If you are separated and your spouparate sheet to this form. On the part 1: Describe Employment | ou are married and not f use is not filing with you e top of any additional pa | iling jointly, and your spous , do not include information ages, write your name and o | se is living with you, include information about your spoun n about your spouse. If more space is needed, attach a case number (if known). Answer every question. |
| e as complete and accurate as possipplying correct information. If you are separated and your spouparate sheet to this form. On the Part 1: Describe Employm Fill in your employment information. If you have more than one job, attach a separate page with information about additional | ou are married and not f use is not filing with you e top of any additional pa nent | Debtor 1 Employed Not employed | se is living with you, include information about your spot about your spouse. If more space is needed, attach a case number (if known). Answer every question. Debtor 2 or non-filing spouse |
| e as complete and accurate as possipplying correct information. If you are separated and your spot parate sheet to this form. On the Part 1: Describe Employm Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or | ou are married and not f use is not filing with you e top of any additional pa nent | iling jointly, and your spous, do not include information ages, write your name and o | se is living with you, include information about your spoun about your spouse. If more space is needed, attach a case number (if known). Answer every question. Debtor 2 or non-filing spouse |
| e as complete and accurate as possipplying correct information. If you are separated and your spot parate sheet to this form. On the part 1: Describe Employm Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student | ou are married and not fuse is not filing with you e top of any additional parent Employment status | Debtor 1 Employed Not employed | se is living with you, include information about your spoun about your spouse. If more space is needed, attach a case number (if known). Answer every question. Debtor 2 or non-filing spouse |
| e as complete and accurate as possipplying correct information. If you are separated and your spouparate sheet to this form. On the Part 1: Describe Employment information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation may include student | ou are married and not fuse is not filing with you at top of any additional parent Employment status Occupation | Debtor 1 Debtor 1 Debtor 1 RetiredN/A- | se is living with you, include information about your spon about your spouse. If more space is needed, attach a case number (if known). Answer every question. Debtor 2 or non-filing spouse |

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

-N/A-

ZIP Code

State

State ZIP Code

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

-N/A-City

How long employed there?

For Debtor 1 For Debtor 2 or non-filing spouse ${\hbox{\bf 2. \ List monthly gross wages, salary, and commissions}} \ (\hbox{\bf before all payroll}$ deductions). If not paid monthly, calculate what the monthly wage would be. 0.00 0.00 3. Estimate and list monthly overtime pay. 0.00 4. Calculate gross income. Add line 2 + line 3.

Debtor 1

| Dixie | | Hill |
|-----------|-------------|-----------|
| irst Name | Middle Name | Last Name |

Case number (if known)_____

| | | Fo | r Debtor 1 | For Debtor 2 or non-filing spouse | |
|--|-------------|----------|---------------|-----------------------------------|----------------------|
| Copy line 4 here | → 4. | \$_ | 0.00 | \$ | |
| 5. List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ \$ | 0.00 | \$ | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | |
| 5d. Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$ | |
| 5e. Insurance | 5e. | \$_ | 0.00 | \$ | |
| 5f. Domestic support obligations | 5f. | \$_ | 0.00 | \$ | |
| 5g. Union dues | 5g. | \$_ | 0.00 | \$ | |
| 5h. Other deductions. Specify: | 5h. | +\$ | 0.00 | + \$ | |
| 6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | . 6. | \$ | 0.00 | \$ | |
| S. Add the payron deductions. And thirds out 1 05 1 00 1 00 101 1 0g 1 0h. | 0. | Ψ | | Ψ | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 0.00 | \$ | |
| 8. List all other income regularly received: | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | • | 0.00 | • | |
| monthly net income. | 8a. | \$ | 0.00 | \$ | |
| 8b. Interest and dividends | 8b. | \$_ | 0.00 | \$ | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | ent | | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$_ | 0.00 | \$ | |
| 8d. Unemployment compensation | 8d. | \$_ | 0.00 | \$ | |
| 8e. Social Security | 8e. | \$_ | 1,491.00 | \$ | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | nce 8f. | \$ | 0.00 | \$ | |
| | | • | 830.68 | | |
| 8g. Pension or retirement income | 8g. | \$_ | | \$ | |
| 8h. Other monthly income. Specify: | 8h. | +\$_ | 0.00 | +\$ | |
| 9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$_ | 2,321.68 | \$ | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | 2,321.68 | + \$N/A | = \$ 2,321.68 |
| 11. State all other regular contributions to the expenses that you list in Sche | | | | | |
| Include contributions from an unmarried partner, members of your household, friends or relatives. | | • | | · | |
| Do not include any amounts already included in lines 2-10 or amounts that are | | | e to pay expe | | + \$ 0.00 |
| Specify: | | | | 11. • | + \$ <u>0.00</u> |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S | | | | • | \$ 2,321.68 Combined |
| 13. Do you expect an increase or decrease within the year after you file this ✓ No. | form? | ? | | | monthly income |
| Yes. Explain: | | | | | |
| | | | | | |

| 03/28/19 | | | Case 19-21911 | |
|---------------------------------------|------------------|---|----------------------------|--|
| Debtor 1 Debtor 2 (Spouse, if filing | Dixie First Name | entify your case: Middle Name Middle Name or the: Eastern District of Ca | Hill Last Name Last Name | Check if this is: An amended filing A supplement showing postpetition chapter 13 expenses as of the following date: MM / DD / YYYY |
| Official I | orm 106. | Your Expen | ises | 12/15 |
| information. | | needed, attach another sestion. | | both are equally responsible for supplying correct of any additional pages, write your name and case number |

| ľ | Part 1: Describe Your Hou | ısehold | | | |
|----|--|---|---------------------------------|-------------|---------------------|
| 1. | Is this a joint case? | | | | |
| | No. Go to line 2. Yes. Does Debtor 2 live in a s | separate household? | | | |
| | ☐ No☐ Yes. Debtor 2 must fil | e Official Form 106J-2, <i>Expenses for</i> S | Separate Household of Debtor 2. | | |
| 2. | Do you have dependents? | ☑ No | Dependent's relationship to | Dependent's | Does dependent live |
| | Do not list Debtor 1 and Debtor 2. | Yes. Fill out this information for each dependent | Debtor 1 or Debtor 2 | age | with you? |
| | Do not state the dependents' names. | each dependent | | | □ No □ Yes |
| | | | | | ☐ No ☐ Yes |
| | | | | | ☐ No ☐ Yes |
| | | | | | ☐ No ☐ Yes |
| | | | | | ☐ No ☐ Yes |
| 3. | Do your expenses include expenses of people other than yourself and your dependents? | ☑ No □ Yes | | | |
| Ð | art 2: Estimate Your Ongo | ing Monthly Expenses | | | |

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and 1,250.00 any rent for the ground or lot. If not included in line 4: 0.00 Real estate taxes 4a. 4a. 0.00 Property, homeowner's, or renter's insurance 4b. 4b. 10.00 Home maintenance, repair, and upkeep expenses 4c. 4c. 0.00 Homeowner's association or condominium dues 4d. 4d.

Debtor 1

Dixie Hill
First Name Middle Name Last Name

Case number (if known)

| | | | Your ex | xpenses |
|--|--|----------------------|---------|---------|
| 5. Additional mortgage payments for your re | esidence, such as home equity loans | 5. | \$ | 0.00 |
| 6. Utilities: | | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$ | 0.00 |
| 6b. Water, sewer, garbage collection | | 6b. | \$ | 0.00 |
| 6c. Telephone, cell phone, Internet, satellit | e, and cable services | 6c. | \$ | 60.00 |
| 6d. Other. Specify: | | 6d. | \$ | 0.00 |
| 7. Food and housekeeping supplies | | 7. | \$ | 300.00 |
| 8. Childcare and children's education costs | | 8. | \$ | 0.00 |
| 9. Clothing, laundry, and dry cleaning | | 9. | \$ | 100.00 |
| 10. Personal care products and services | | 10. | \$ | 50.00 |
| 11. Medical and dental expenses | | 11. | \$ | 70.00 |
| Transportation. Include gas, maintenance, Do not include car payments. | bus or train fare. | 12. | \$ | 190.00 |
| 13. Entertainment, clubs, recreation, newspa | pers, magazines, and books | 13. | \$ | 100.00 |
| 14. Charitable contributions and religious do | nations | 14. | \$ | 0.00 |
| 15. Insurance.Do not include insurance deducted from you | r pay or included in lines 4 or 20. | | | |
| 15a. Life insurance | | 15a. | \$ | 0.00 |
| 15b. Health insurance | | 15b. | \$ | 0.00 |
| 15c. Vehicle insurance | | 15c. | \$ | 115.00 |
| 15d. Other insurance. Specify: | | 15d. | \$ | 0.00 |
| 16. Taxes. Do not include taxes deducted from y Specify: Vehicle Registration | your pay or included in lines 4 or 20. | 16. | \$ | 22.00 |
| 17. Installment or lease payments: | | | | |
| 17a. Car payments for Vehicle 1 | | 17a. | \$ | 0.00 |
| 17b. Car payments for Vehicle 2 | | 17b. | \$ | 0.00 |
| 17c. Other. Specify: | | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | | 17d. | \$ | 0.00 |
| 18. Your payments of alimony, maintenance, your pay on line 5, Schedule I, Your Incor | and support that you did not report as deducted ne (Official Form 106I). | I from 18. | \$ | 0.00 |
| 19. Other payments you make to support oth | ers who do not live with you. | | | |
| Specify: | | 19. | \$ | 0.00 |
| 20. Other real property expenses not include | d in lines 4 or 5 of this form or on Schedule I: Yo | our Income. | | |
| 20a. Mortgages on other property | | 20a. | \$ | 0.00 |
| 20b. Real estate taxes | | 20b. | \$ | 0.00 |
| 20c. Property, homeowner's, or renter's insu | ırance | 20c. | \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep exper | nses | 20d. | \$ | 0.00 |
| 20e. Homeowner's association or condomin | ium dues | 20e. | \$ | 0.00 |

| Debtor 1 | Dixie First Name | Middle Name | Hill Last Name | Ca | se number (if known) | | |
|---------------|------------------------------------|------------------|--------------------------------|---|----------------------|----------|----------|
| 1. Oth | ner. Specify: Pe | t Care | | | 21. | +\$ | 50.00 |
| 2. Cal | culate your mor | nthly expenses | · | | | | |
| 22a | . Add lines 4 thro | ough 21. | | | 22a. | \$ | 2,317.00 |
| 22b | . Copy line 22 (m | nonthly expense | es for Debtor 2), if any, from | Official Form 106J-2 | 22b. | \$ | 0.00 |
| 22c | . Add line 22a an | d 22b. The resu | ult is your monthly expense | S. | 22c. | \$ | 2,317.00 |
| | | | | | | <u> </u> | |
| 3. Calc | ulate your mont | hly net income | 9 . | | | | 0.004.00 |
| 23a. | Copy line 12 (y | our combined r | monthly income) from Sched | dule I. | 23a. | \$ | 2,321.68 |
| 23b. | Copy your mon | thly expenses f | rom line 22c above. | | 23b. | -\$ | 2,317.00 |
| 23c. | Subtract your n | nonthly expense | es from your monthly incom | e. | | • | 4.68 |
| | The result is yo | our monthly net | income. | | 23c. | Φ | 4.00 |
| For e | example, do you gage payment to | expect to finish | paying for your car loan wil | thin the year after you file hin the year or do you expectation to the terms of your me | t your | | |
| ☑ N □ Y | | | | | | | |
| - | es. Explain h | nere: | | | | | |

| Fill in this information to identify your case: | | | | | |
|---|----------------------|-----------------------------|---------------|--|--|
| Debtor 1 | Dixie | | Hill | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E Case number (If known) | Bankruptcy Court for | the: Eastern District of Ca | alifornia | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| d you pay or agree to pay someone who | o is NOT an attorney to help you fill out bankruptcy forms? |
|---|--|
| , No | |
| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
| | Signature (Official Form 119). |
| | |
| | ave read the summary and schedules filed with this declaration and |
| at they are true and correct. | |
| at they are true and correct. /s/ Dixie Hill | * |
| at they are true and correct. /s/ Dixie Hill | |
| | * |

| Fill in this information to identify your case: | | | | | | |
|---|--|-------------|-----------|--|--|--|
| Debtor 1 | Dixie | | Hill | | | |
| - | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | United States Bankruptcy Court for the: Eastern District of California | | | | | |
| Case number (If known) | | | | | | |

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| nt is your current marita Married Not married | al status? | | | | | |
|---|----------------------------|----------------|-----------------------|---|------------------------------|--|
| ing the last 3 years, have No Yes. List all of the places | | | • | | | |
| Debtor 1: | | Dates lived | | Pebtor 2: | | Dates Debtor 2 lived there |
| 601 10th Street # Number Street Sacramento City | 3 | From To | 08/2017 01/2018 | Same as Debtor 1 515 21st Street : Number Street Sacramento City | #3 CA 95811 State ZIP Code | ☐ Same as Debtor 1 From 2018 To 2018 |
| 6508 Canyon Cre | eek Way | - From To | 02/2016 08/08/2017 | Same as Debtor 1 Number Street | | Same as Debtor 1 From To |
| Elk Grove | CA 95758 State ZIP Code | _ | | City | State ZIP Code | |

Part 2: Explain the Sources of Your Income

Filed 03/28/19 Case 19-21911 Doc 1

Case number (if known)

Hill

Dixie

| Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have inco | d from all jobs and all busi | nesses, including part-tir | me activities. | endar years? |
|--|---|--|---|---|
| ☑ No ☑ Yes. Fill in the details. | | | | |
| Tes. Fill III the details. | Debtor 1 | | Debtor 2 | |
| | | | | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tipsOperating a business | \$0.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| For last calendar year: (January 1 to December 31,2018 | Wages, commissions, bonuses, tips Operating a business | \$0.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| For the calendar year before that: (January 1 to December 31, 2017 | ✓ Wages, commissions, bonuses, tips) ☐ Operating a business | \$1,355.43 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| nclude income regardless of whether that inconemployment, and other public benefit payn ambling and lottery winnings. If you are filing | come is taxable. Examples nents; pensions; rental inco g a joint case and you have | of other income are alinome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once | suits; royalties; and |
| nclude income regardless of whether that incomended income regardless of whether that incomended incoment, and other public benefit paying ambling and lottery winnings. If you are filing its each source and the gross income from the the gr | come is taxable. Examples nents; pensions; rental inco g a joint case and you have | of other income are alinome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once | suits; royalties; and |
| nclude income regardless of whether that incurrence income regardless of whether that incurrence incoment, and other public benefit paying ambling and lottery winnings. If you are filing its each source and the gross income from a No | come is taxable. Examples nents; pensions; rental inco g a joint case and you have | of other income are alinome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once | suits; royalties; and |
| nclude income regardless of whether that inconemployment, and other public benefit payn ambling and lottery winnings. If you are filing ist each source and the gross income from a No | come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Do | of other income are alinome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once t you listed in line 4. | suits; royalties; and e under Debtor 1. Gross income from each source |
| nclude income regardless of whether that inconemployment, and other public benefit payn ambling and lottery winnings. If you are filing ist each source and the gross income from the No Yes. Fill in the details. | come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income | of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | suits; royalties; and e under Debtor 1. Gross income from each source (before deductions and |
| nclude income regardless of whether that inconemployment, and other public benefit payn ambling and lottery winnings. If you are filing ist each source and the gross income from a No | come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. | of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | suits; royalties; and e under Debtor 1. Gross income from each source (before deductions and |
| nclude income regardless of whether that inconemployment, and other public benefit payn ambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until | come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. | of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and exclusions) \$ 0.00 | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | suits; royalties; and e under Debtor 1. Gross income from each source (before deductions and |
| reclude income regardless of whether that income nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: | come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. 2018 Tax Refund Social Security | Gross income from each source (before deductions and exclusions) \$\begin{array}{c} \text{Gross income from each source} \text{(before deductions and exclusions)} \end{array} \$\begin{array}{c} \text{0.00} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and exclusions) |
| reclude income regardless of whether that income problems and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from the lottery and the gross income from the lottery and the gross income from the lottery and the gross income from the lotter and the lotter and the gross income from the lotter and th | come is taxable. Examples ments; pensions; rental income g a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. 2018 Tax Refund Social Security Retirement | Gross income from each source (before deductions and exclusions) \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and exclusions) |
| reclude income regardless of whether that incomemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: | come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. 2018 Tax Refund Social Security Retirement 2017 Tax Refund | Gross income from each source (before deductions) \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 | come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. 2018 Tax Refund Social Security Retirement 2017 Tax Refund Social Security Retirement | Gross income from each source (before deductions and exclusions) \$\begin{array}{c} 0.00 \\ \\$ 4,473.00 \\ \\$ 1,661.36 \\ \\$ 25.00 \\ \\$ 17,388.00 \\ \\$ 9,968.16 \end{array} | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and exclusions) - \$ |
| For last calendar year: (January 1 to December 31,2018 | come is taxable. Examples nents; pensions; rental income g a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. 2018 Tax Refund Social Security Retirement 2017 Tax Refund Social Security | Gross income from each source (before deductions and exclusions) \$\begin{array}{c} 0.00 \\ \\$ 4,473.00 \\ \\$ 1,661.36 \end{array} \$\begin{array}{c} 25.00 \\ \\$ 17,388.00 \end{array} | money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income | Gross income from each source (before deductions and exclusions) |

Filed 03/28/19 Case 19-21911 Doc 1

| Debtor 1 | Dixie | | Hill | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

| re eith | er Debtor 1's or De | btor 2's deb | ts primarily o | onsumer debts | ? | | | | |
|---------------|---|------------------------------|-----------------|--------------------|-----------|---|----------------|-----------------|---|
| No. | Neither Debtor 1 n | or Debtor 2 vidual primar | has primarily | consumer deb | ots. Cons | sumer debts are purpose." | defined in 1 | 1 U.S.C. § 101(| 8) as |
| | During the 90 days | before you fi | led for bankru | ptcy, did you pa | y any cre | editor a total of \$6 | 6,425* or mo | ore? | |
| | ☐ No. Go to line 7 | | | | | | | | |
| | | nt you paid t | hat creditor. D | o not include pa | yments | or more in one or for domestic supp n attorney for this | ort obligation | ons, such as | |
| | * Subject to adjustn | | • | | | • | | | |
| 1 vos | . Debtor 1 or Debtor | r 2 or both b | avo primarily | consumer deb | te | | | | |
| 1 165. | During the 90 days | | | | | editor a total of \$6 | 600 or more | ? | |
| | _ | | | p.o,, a.a., oa pa. | , u, o | ranto, a total oi p | | | |
| | No. Go to line 7 | | | | | | | | |
| | | o not include | payments for | domestic suppo | rt obliga | nore and the tota tions, such as ch bankruptcy case | ild support | | |
| | | | | Dates of payment | Total a | mount paid | Amount yo | ou still owe | Was this payment for |
| | Capital One | Auto Fina | ance | 03/13/2019 | \$ | 14,400.43 | \$ | 0.00 | ☐ Mortgage |
| | P.O. Box 25 | 59407 | | 02/06/2010 | | | | | ☑ Car |
| | Number Street | | | 02/06/2019 | | | | | ☐ Credit card |
| | | | | 01/07/2019 | | | | | Loan repayment |
| | | TX | 75025 | | | | | | ☐ Suppliers or vendo |
| | Dlana | | | | | | | | ☐ Other |
| | Plano City | State | ZIP Code | | | | | | |
| | | | ZIP Code | | Ф. | | r. | | |
| | | | ZIP Code | | \$ | | \$ | | ☐ Mortgage |
| | City | | ZIP Code | | \$ | | \$ | | ☐ Car |
| | City | | ZIP Code | | \$ | | \$ | | ☐ Car ☐ Credit card |
| | City Creditor's Name | | ZIP Code | | \$ | | \$ | | ☐ Car ☐ Credit card ☐ Loan repayment |
| | City Creditor's Name | | ZIP Code | | \$ | | \$ | | ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendo |
| | City Creditor's Name | | ZIP Code | | \$ | | \$ | | ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendo |
| | Creditor's Name Number Street | State | | | | | | | ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendo ☐ Other |
| | City Creditor's Name Number Street City | State | | | \$ | | \$ | | Car Credit card Loan repayment Suppliers or vendor Other Mortgage |
| | Creditor's Name Number Street | State | | | | | | | ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendo ☐ Other |
| | City Creditor's Name Number Street City | State | | | | | | | Car Credit card Loan repayment Suppliers or vendor Other Mortgage |
| | Creditor's Name Number Street City Creditor's Name | State | | | | | | | Car Credit card Loan repayment Suppliers or vendo Other Mortgage Car |
| | Creditor's Name Number Street City Creditor's Name | State | | | | | | | Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card |

Case number (if known)

Hill

Dixie

| Vithin 1 year before you filed for bankruptcy, did yasiders include your relatives; any general partners; orporations of which you are an officer, director, persent, including one for a business you operate as a such as child support and alimony. | relatives of any son in control, o | general partners; per owner of 20% or | partnerships of which more of their voting | h you are a general partner; securities; and any managing |
|--|---------------------------------------|---------------------------------------|---|---|
| 1 No | | | | |
| Yes. List all payments to an insider. | | | | |
| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| Insider's Name | | \$ | \$ | |
| ilisidei s Naille | | | | |
| Number Street | | | | |
| | | | | |
| City State ZIP Code | _ | | | |
| | | \$ | \$ | |
| Insider's Name | | | | |
| Number Street | | | | |
| | | | | |
| City State ZIP Code | _ | | | |
| ithin 1 year before you filed for bankruptcy. did v | vou make anv i | payments or trans | sfer any property o | n account of a debt that benefited |
| n insider? clude payments on debts guaranteed or cosigned b I No | y an insider. | | | |
| ithin 1 year before you filed for bankruptcy, did yn insider? clude payments on debts guaranteed or cosigned b No Yes. List all payments that benefited an insider. | | Total amount paid | Amount you still owe | n account of a debt that benefited Reason for this payment Include creditor's name |
| n insider? clude payments on debts guaranteed or cosigned b I No | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| n insider? clude payments on debts guaranteed or cosigned b No | y an insider. Dates of | Total amount | Amount you still | Reason for this payment |
| n insider? clude payments on debts guaranteed or cosigned b No Yes. List all payments that benefited an insider. | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| n insider? clude payments on debts guaranteed or cosigned b No Yes. List all payments that benefited an insider. Insider's Name | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| n insider? clude payments on debts guaranteed or cosigned b No Yes. List all payments that benefited an insider. Insider's Name Number Street | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Insider? Clude payments on debts guaranteed or cosigned by No I Yes. List all payments that benefited an insider. Insider's Name Number Street | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Ininsider? Clude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider. Insider's Name Number Street City State ZIP Code | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Ininsider? Clude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider. Insider's Name Number Street City State ZIP Code | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |

| Debtor 1 | Dixie | | Hill | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

| ithin 1 year before you filed for best all such matters, including personal contract disputes. | | | | | |
|--|--------------|--|---|------------|------------------------|
| No | | | | | |
| Yes. Fill in the details. | | | | | |
| | Natur | e of the case | Court or agency | | Status of the case |
| | | | | | |
| Case title | | | Court Name | | Pending |
| | | | | | On appeal |
| | | | Number Street | | Concluded |
| Case number | | | | | |
| | | | City State | e ZIP Code | |
| Case title | | | | | — Pending |
| Case title | | | Court Name | | On appeal |
| | | | Number Street | | Concluded |
| | | | Number Street | | Concluded |
| Case number | | | City State | e ZIP Code | |
| | | | | | |
| No. Go to line 11. Yes. Fill in the information below. | | | | | |
| | | Describe the prope | orty | Date | Value of the property |
| | | Describe the prope | erty | Date | |
| | | Describe the prope | erty | Date | Value of the property |
| Yes. Fill in the information below. Creditor's Name | | | | Date | |
| Yes. Fill in the information below. | | Explain what happe | ened | Date | |
| Yes. Fill in the information below. Creditor's Name | | Explain what happe | ened repossessed. | Date | |
| Yes. Fill in the information below. Creditor's Name | | Explain what happed Property was Property was | ened repossessed. foreclosed. | Date | |
| Yes. Fill in the information below. Creditor's Name Number Street | | Explain what happed Property was Property was Property was | ened repossessed. foreclosed. garnished. | Date | |
| Yes. Fill in the information below. Creditor's Name Number Street | | Explain what happed Property was Property was Property was | ened repossessed. foreclosed. garnished. attached, seized, or levied. | Date | \$ |
| Yes. Fill in the information below. Creditor's Name Number Street | | Explain what happed Property was Property was Property was Property was | ened repossessed. foreclosed. garnished. attached, seized, or levied. | | \$ |
| Yes. Fill in the information below. Creditor's Name Number Street | | Explain what happed Property was Property was Property was Property was | ened repossessed. foreclosed. garnished. attached, seized, or levied. | | \$ |
| Yes. Fill in the information below. Creditor's Name Number Street | | Explain what happed Property was Property was Property was Property was | ened repossessed. foreclosed. garnished. attached, seized, or levied. | | \$Value of the propert |
| Yes. Fill in the information below. Creditor's Name Number Street City Sta | | Explain what happed Property was Property was Property was Property was Describe the prope | ened repossessed. foreclosed. garnished. attached, seized, or levied. | | Value of the propert |
| Yes. Fill in the information below. Creditor's Name Number Street City Sta | | Explain what happed Property was Property was Property was Property was Describe the property was Describe the property was Property was Describe the property was Described the property was Descri | ened repossessed. foreclosed. garnished. attached, seized, or levied. erty | | \$Value of the propert |
| Yes. Fill in the information below. Creditor's Name Number Street City Sta | | Explain what happed Property was Property was Property was Property was Describe the proped Explain what happed | ened repossessed. foreclosed. garnished. attached, seized, or levied. erty ened repossessed. | | \$Value of the propert |
| Yes. Fill in the information below. Creditor's Name Number Street City Sta | | Explain what happed Property was Property was Property was Property was Property was Explain what happed Property was Property was Property was | ened repossessed. foreclosed. garnished. attached, seized, or levied. erty ened repossessed. foreclosed. | | \$Value of the propert |
| Yes. Fill in the information below. Creditor's Name Number Street City Sta | ite ZIP Code | Explain what happed Property was Property was Property was Property was Describe the proped Explain what happed Property was Property was Property was Property was Property was | ened repossessed. foreclosed. garnished. attached, seized, or levied. erty ened repossessed. foreclosed. | | \$Value of the propert |

Case number (if known)

Hill

| /ithin 90 days before you filed for bankrupt ccounts or refuse to make a payment beca | tcy, did any creditor, including a bank or financial ins | titution, set off any am | ounts from your |
|--|--|--------------------------|-------------------|
| No | iuse you owed a debt? | | |
| Yes. Fill in the details. | | | |
| | Describe the action the creditor took | Date action | Amount |
| | | was taken | |
| Creditor's Name | | | |
| Number Street | | | \$ |
| | | | |
| | | | |
| City State ZIP Code | Last 4 digits of account number: XXXX | | |
| | | | |
| 1 No 1 Yes | | | |
| 5: List Certain Gifts and Contribut | iono | | |
| 5) List Certain Girts and Contribut | ions | | |
| ithin 2 years before you filed for bankrupt | cy, did you give any gifts with a total value of more th | an \$600 ner nerson? | |
| 1 No | oy, and you give any give man a total value of more an | ian toos per percent | |
| | | | |
| Yes. Fill in the details for each gift. | | | |
| - | | | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| Gifts with a total value of more than \$600 | Describe the gifts | | Value |
| Gifts with a total value of more than \$600 per person | Describe the gifts | | Value \$ |
| Gifts with a total value of more than \$600 | Describe the gifts | | Value |
| Gifts with a total value of more than \$600 per person | Describe the gifts | | Value \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | Value \$\$ |
| Gifts with a total value of more than \$600 per person | Describe the gifts | | Value \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | | Value \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code | Describe the gifts | | Value \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | Describe the gifts | | Value \$\$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | Describe the gifts Describe the gifts | Dates you gave | Value \$ Value |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you | | the gifts | \$ \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$ \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | | Dates you gave | \$ \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$ \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | | Dates you gave | \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | \$ |
| Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | \$ |

Dixie

| ebtor 1 | Dixie First Name Middle Name | Hill Last Name | Case number (# known) | | |
|----------------|--|-------------------|---|------------------------------|------------------------|
| | That Name | Last Harr | | | |
| | | | | | |
| | | bankruptcy | η, did you give any gifts or contributions with a total valu | e of more than \$60 | 00 to any charity? |
| | No Yes. Fill in the details for each gif | ft or contribu | ution. | | |
| | - | | | | |
| | Gifts or contributions to charities that total more than \$600 | | Describe what you contributed | Date you contributed | Value |
| | | | | | |
| | Charity's Name | | | | \$ |
| | Chanty's Name | | | | |
| | | | | | \$ |
| | N | | | | |
| | Number Street | | | | |
| | City State ZIP Code | | | | |
| | City State Zir Code | | | | |
| | | | | | |
| Part 6 | List Certain Losses | | | | |
| 15. Wit | hin 1 year before you filed for b | ankruptcy | or since you filed for bankruptcy, did you lose anything | because of theft, f | ire, other |
| dis | aster, or gambling? | | | | |
| | | | | | |
| u | Yes. Fill in the details. | | | | |
| | Describe the property you lost and how the loss occurred | d | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
| | now the loss occurred | | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | 1033 | 1031 |
| | | | | | |
| | | | | | \$ |
| | | | | | |
| Part 7 | List Certain Payments of | or Transfe | ers | | |
| 16. Wit | hin 1 year before you filed for b | ankruptcy. | did you or anyone else acting on your behalf pay or trar | sfer any property | to anyone |
| you | ı consulted about seeking bank | ruptcy or p | preparing a bankruptcy petition? | | , , |
| | | tition prepa | rers, or credit counseling agencies for services required in yo | our bankruptcy. | |
| | No Yes. Fill in the details. | | | | |
| _ | res. I ill ill the details. | | Description and value of any manager transferred | Data waymant av | Amount of payment |
| | Law Offices of Mark Shmo | orgon | Description and value of any property transferred | Date payment or transfer was | Amount or payment |
| | Person Who Was Paid 5015 Madison Ave., Suite | Δ 9 | S1,140.10 - Attorney's Fees | made | |
| | Number Street | | 335.00 - Filing Fee | 03/22/2019 | \$1,500.00 |
| | | | 814.95 - Credit Counseling 89.95 - Financial Management | | |
| | Sacramento CA 95 | | 59.95 - Financiai Management 61,500.00 - Total | | \$ |
| | | Code | • | | |
| | shmorgonlaw@gmail.com | <u>1</u> | | | |
| | Email or website address | | | | |
| | Person Who Made the Payment, if Not Yo | u | | | |

| 1 DIXIE First Name | Middle Name Last | Name | Case number (if known) | | |
|-------------------------------------|--|--|--|---|---------------------|
| T list Name | Wildle Name Last | Name | | | |
| | | Description and value of any property to | ransferred | Date payment or transfer was made | Amount of payment |
| Person Who Was F | Paid | | | | ¢ |
| Number Street | | | | | Ψ |
| | | | | | Φ |
| City | State ZIP Code | | | | |
| http://www.muoio | cheabankruptcyattorney.com/ | _ | | | |
| Person Who Made | the Payment, if Not You | | | | |
| | payment or transfer that y | tors or to make payments to your cred | | | |
| | | Description and value of any property to | ransferred | Date payment or transfer was made | Amount of pay |
| Person Who Was I | Paid | | | | |
| Number Street | | | | | \$ |
| City | State ZIP Code | | | | \$ |
| insferred in the clude both outrigh | ordinary course of your nt transfers and transfers r and transfers that you ha | btcy, did you sell, trade, or otherwise to business or financial affairs? made as security (such as the granting of the very already listed on this statement. Description and value of property transferred | of a security interest or m | nortgage on your pro | perty). Date trans |
| Unknown T | | 3735 Solomon Island Road | After all closing or | | was made |
| Steward Tit | tle of Sacramento_ | West Sacramento, CA 95691 | After all closing comortgage satisfac | | 03/12/20 |
| | oint Road #125 | Sold for \$335,000.00 | Net | | |
| Folsom City | CA 95630 State ZIP Code | | \$17,330.21 - Dixie \$17,330.22 - Willi | | |
| Person's relation | nship to you 3rd Party | | 1 | | |
| Person Who Receiv | ved Transfer | | | | |
| Number Street | | | | | |
| | | | | | |
| City | State 7IP Code | | | | |

Person's relationship to you _____

| Debtor 1 | Dixie First Name | Hill Middle Name Last Na | me | Case | e number (if knowr |) | | |
|----------|---------------------------|---|------------------------------------|---------------|--------------------|--|-----------|---------------|
| | | | | | | | | |
| | | | tcy, did you transfer any proper | y to a self | -settled trust | or similar device of w | vhich you | |
| | | These are often called ass | set-protection devices.) | | | | | |
| | No Yes. Fill in the de | etails. | | | | | | |
| | | | Description and value of the prope | rty transforr | ed | | Date | transfer |
| | | | Description and value of the prope | ity transien | | | was r | |
| | Name of trust | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | _ | | | | | | | |
| Part 8 | List Certain | n Financial Accounts, | Instruments, Safe Deposit | Boxes, a | nd Storage | Units | | |
| | - | e you filed for bankruptc d, or transferred? | y, were any financial accounts o | r instrume | nts held in yo | our name, or for your | benefit, | |
| Incl | lude checking, s | avings, money market, o | r other financial accounts; certi | | | es in banks, credit un | ions, | |
| | - | pension funds, cooperat | ives, associations, and other fin | ancial inst | titutions. | | | |
| 5 | No Yes. Fill in the d | letails. | | | | | | |
| | | | Last 4 digits of account number | Type of ac | count or | Date account was | Last bala | ance before |
| | | | | instrumer | nt | closed, sold, moved, or transferred | closing o | or transfer |
| | Name of Financial I | nstitution | | П., | | | | |
| | | | XXXX | ☐ Check | - | | \$ | |
| | Number Street | | | ☐ Money | | | | |
| | | | | ☐ Broke | rage | | | |
| | City | State ZIP Code | | Other_ | | | | |
| | | | XXXX- | ☐ Check | ina | | \$ | |
| | Name of Financial I | nstitution | | Saving | | | Ψ | |
| | Number Street | | | ☐ Money | | | | |
| | | | | ☐ Broke | | | | |
| | City | State ZIP Code | | Other_ | | | | |
| 21 Do | | | vear before you filed for bankrup | itov anve: | afa danosit h | ov or other denositor | v for | |
| sec | urities, cash, or | other valuables? | real before you med for banking | icy, any se | are deposit b | ox or other depositor | y 101 | |
| U | No Yes. Fill in the d | lotaile | | | | | | |
| _ | res. Fill III tile t | icians. | Who else had access to it? | | Describe the | contents | Γ | Do you still |
| | | | | | | | | nave it? |
| | Name of Electrical Line | and the street | | | | | | ☑ No ☑ Yes |
| | Name of Financial I | IIISULULION | Name | | | | | |
| | Number Street | | Number Street | | | | | |
| | | | City State ZIP Code | | | | | |
| | City | State 7IP Code | Oily State ZIF Code | | | | | |

| r 1 | Dixie | | | Case number (if known) | | |
|--|--|---|--|--|---|----------------------|
| | First Name N | Middle Name Last | t Name | <u></u> | | |
| | | | | | | |
| | | rty in a storage unit | or place other than your home w | ithin 1 year before you filed for | r bankruptcy? | |
| 1 No | 0 | | | | | |
| Ye | es. Fill in the deta | ils. | | | | |
| | | | Who else has or had access to it? | Describe the conten | nts | Do you sti |
| | | | | | | have it? |
| | | | | | | □ No |
| i | Name of Storage Facili | ty | Name | | | Yes |
| | | | | | | |
| i | Number Street | | Number Street | | | |
| | | | | | | |
| | | | City State ZIP Code | | | |
| | City | State ZIP Code | | | | |
| | , | | | ' | | ' |
| t 9: | Identify Pr | operty You Hold | or Control for Someone Else | | | |
| . 91 | identity i i | | | | | |
| Do y | ou hold or contro | I any property that s | someone else owns? Include any | property you borrowed from, a | are storing for, | |
| | old in trust for sor | meone. | | | | |
| Ø N | lo | | | | | |
| ☐ Y | es. Fill in the deta | ails. | | | | |
| | | | Where is the property? | Describe the proper | rty | Value |
| | | | | | | |
| | | | | | | \$ |
| | | | | | | Ψ |
| | Owner's Name | | | | | |
| | | | Number Street | | | |
| | Number Street | | Number Street | | | |
| | | | Number Street | | | |
| | Number Street | State ZIP Code | | ZIP Code | | |
| | | State ZIP Code | | ZIP Code | | |
| | Number Street City | | | ZIP Code | | |
| t 10 | Number Street City Give Detai | ils About Environ | City State Z mental information | ZIP Code | | |
| t 1 0 | Number Street City Give Detail purpose of Part 1 | Is About Environ | City State 2 mental Information initions apply: | | | |
| t 1 0 | City Give Detai purpose of Part 1 ronmental law me | Ils About Environ 0, the following define eans any federal, sta | City State 2 mental Information initions apply: ate, or local statute or regulation of | concerning pollution, contamir | | |
| the | City Give Detai purpose of Part 1 fronmental law me | 0, the following defi eans any federal, sta bstances, wastes, o | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, so | concerning pollution, contamir surface water, groundwater, o | | |
| the | City Give Detai purpose of Part 1 fronmental law me | 0, the following defi eans any federal, sta bstances, wastes, o | City State 2 mental Information initions apply: ate, or local statute or regulation of | concerning pollution, contamir surface water, groundwater, o | | |
| the Envir haza nclu | City Give Detail purpose of Part 1 fronmental law means ardous or toxic sure adding statutes or remeans any location. | 0, the following definences any federal, states betances, wastes, or regulations controllion, facility, or prope | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substancerty as defined under any environing | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. | r other medium, | |
| the Envir haza nclu | City Give Detail purpose of Part 1 fronmental law means ardous or toxic sure adding statutes or remeans any location. | 0, the following definences any federal, states betances, wastes, or regulations controllion, facility, or prope | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. | r other medium, | |
| the Envii naza nclu Site | Give Detail purpose of Part 1 fronmental law meandous or toxic suiding statutes or means any locations it or used to ow | 0, the following define ans any federal, state bstances, wastes, or regulations controllion, facility, or propern, operate, or utilize | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substancerty as defined under any environing | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c | r other medium, own, operate, or | |
| the Envii haza inclu Site utiliz | Give Detail purpose of Part 1 fronmental law meandous or toxic suiding statutes or means any location the it or used to ownerdous material means and means and material means and mean | 0, the following define ans any federal, state bstances, wastes, or regulations controllion, facility, or propern, operate, or utilizate ans anything an er | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substancerty as defined under any environment, including disposal sites. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c | r other medium, own, operate, or | |
| the Environaza nclu Site utiliz Haza subs | City City City Cive Detail purpose of Part 1 fronmental law meandous or toxic suiding statutes or remeans any location in the city of | 0, the following defi- eans any federal, sta- bstances, wastes, o regulations controlli- on, facility, or prope /n, operate, or utilize leans anything an er- s material, pollutant, | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance rty as defined under any environmental law defines as a haze, contaminant, or similar term. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c | r other medium, own, operate, or | |
| the Environaza nclu Site utiliz Haza subs | City City City Cive Detail purpose of Part 1 fronmental law meandous or toxic suiding statutes or remeans any location in the city of | 0, the following defi- eans any federal, sta- bstances, wastes, o regulations controlli- on, facility, or prope /n, operate, or utilize leans anything an er- s material, pollutant, | City State 2 mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substancerty as defined under any environmental law defines as a hazen | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c | r other medium, own, operate, or | |
| the Environaza inclu Site utiliz Haza subs | City City City City Cive Detail purpose of Part 1 fronmental law meandous or toxic suiding statutes or remeans any location are it or used to owner ardous material means and stance, hazardous all notices, release | 0, the following deficiency any federal, states any federal, states any federal, states any federal, states any federal and regulations controlling, facility, or proper, operate, or utilized teams anything an error material, pollutant, es, and proceedings | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance arty as defined under any environmental law defines as a haze, contaminant, or similar term. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- | r other medium, own, operate, or stance, toxic | w? |
| the Environaza inclu Site utiliz Haza subs | City City City City Cive Detail purpose of Part 1 fronmental law meandous or toxic suiding statutes or remeans any location are it or used to owner ardous material means and stance, hazardous all notices, release | 0, the following deficiency any federal, states any federal, states any federal, states any federal, states any federal and regulations controlling, facility, or proper, operate, or utilized teams anything an error material, pollutant, es, and proceedings | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance rty as defined under any environmental law defines as a haze, contaminant, or similar term. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- | r other medium, own, operate, or stance, toxic | w? |
| the Environaza inclu Site utiliz Haza subs | City City Give Detail purpose of Part 1 fronmental law me ardous or toxic su uding statutes or r means any location te it or used to own ardous material m stance, hazardous all notices, release any governmental | 0, the following deficiency any federal, states any federal, states any federal, states any federal, states any federal and regulations controlling, facility, or proper, operate, or utilized teams anything an error material, pollutant, es, and proceedings | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance arty as defined under any environmental law defines as a haze, contaminant, or similar term. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- | r other medium, own, operate, or stance, toxic | w? |
| the period the period that the | City City Give Detail purpose of Part 1 fronmental law me ardous or toxic su uding statutes or r means any location te it or used to own ardous material m stance, hazardous all notices, release any governmental | O, the following deficans any federal, states any federal, states and the stances, wastes, or regulations controlling on, facility, or proper, operate, or utilized and anything an error material, pollutant, es, and proceedings and unit notified you the | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance arty as defined under any environmental law defines as a haze, contaminant, or similar term. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- | r other medium, own, operate, or stance, toxic | w? |
| the period the period that the | Give Detail purpose of Part 1 fronmental law means any location are it or used to owner ardous material means and location are it or used to owner ardous material means any governmental law of the location | O, the following deficans any federal, states any federal, states and the stances, wastes, or regulations controlling on, facility, or proper, operate, or utilized and anything an error material, pollutant, es, and proceedings and unit notified you the | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance or the substance of the substa | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- s of when they occurred. y liable under or in violation of | r other medium, own, operate, or stance, toxic f an environmental la | |
| the period the period that the | Give Detail purpose of Part 1 fronmental law means any location are it or used to owner ardous material means and location are it or used to owner ardous material means any governmental law of the location | O, the following deficans any federal, states any federal, states and the stances, wastes, or regulations controlling on, facility, or proper, operate, or utilized and anything an error material, pollutant, es, and proceedings and unit notified you the | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance arty as defined under any environmental law defines as a haze, contaminant, or similar term. | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- | r other medium, own, operate, or stance, toxic f an environmental la | w? Date of notice |
| the period the period that the | Give Detail purpose of Part 1 fronmental law means any location are it or used to owner ardous material means and location are it or used to owner ardous material means any governmental law of the location | O, the following deficans any federal, states any federal, states and the stances, wastes, or regulations controlling on, facility, or proper, operate, or utilized and anything an error material, pollutant, es, and proceedings and unit notified you the | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance or the substance of the substa | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- s of when they occurred. y liable under or in violation of | r other medium, own, operate, or stance, toxic f an environmental la | |
| the period the period that a p | Gity Give Detail purpose of Part 1 ronmental law me rdous or toxic su uding statutes or r means any locatic re it or used to ow ardous material m stance, hazardous all notices, release any governmental do 'es. Fill in the deta | O, the following deficans any federal, states any federal, states and the stances, wastes, or regulations controlling on, facility, or proper, operate, or utilized and anything an error material, pollutant, es, and proceedings and unit notified you the | mental Information initions apply: ate, or local statute or regulation of material into the air, land, soil, sing the cleanup of these substancerty as defined under any environmental law defines as a haze, contaminant, or similar term. Is that you know about, regardless that you may be liable or potentially governmental unit | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- s of when they occurred. y liable under or in violation of | r other medium, own, operate, or stance, toxic f an environmental la | |
| the period the period that a p | Give Detail purpose of Part 1 fronmental law means any location are it or used to owner ardous material means and location are it or used to owner ardous material means any governmental law of the location | O, the following deficans any federal, states any federal, states and the stances, wastes, or regulations controlling on, facility, or proper, operate, or utilized and anything an error material, pollutant, es, and proceedings and unit notified you the | mental Information initions apply: ate, or local statute or regulation or material into the air, land, soil, sing the cleanup of these substance or the substance of the substa | concerning pollution, contamir surface water, groundwater, or ces, wastes, or material. mental law, whether you now c cardous waste, hazardous sub- s of when they occurred. y liable under or in violation of | r other medium, own, operate, or stance, toxic f an environmental la | |
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| tor 1 | Dixie First Name Middle | Hill Name Last Na | | Case number | (if known) | |
|------------|--------------------------|----------------------|--|-------------------------|--|------------------------|
| | i iist Name iviidale | Name Lastine | anie | | | |
| . Have | you notified any gov | ernmental unit of | any release of hazardous mate | rial? | | |
| | No | | | | | |
| □ 1 | es. Fill in the details. | | | | | |
| | | | Governmental unit | Environmental lav | v, if you know it | Date of notice |
| | | | | | | |
| | Name of site | | Governmental unit | _ | | |
| | Number Street | | Number Street | | | |
| | | | | | | |
| | | | City State ZIP Code | _ | | |
| | City | State ZIP Code | | | | |
| Have | vou been a party in a | nnv iudicial or adm | ninistrative proceeding under a | nv environmental la | aw? Include settlements | and orders. |
| | | , , | g | , | | |
| | es. Fill in the details. | | | | | |
| | | | Court or agency | Nature of the | e case | Status of the case |
| c | Case title | | | | | |
| | | | Court Name | | | Pending |
| - | | | Number Street | | | On appea |
| | | | Number Street | | | Conclude |
| 7 | Case number | | City State ZIP C | ode | | |
| | | | | | | |
| [| A sole proprietor o | r self-employed in | cy, did you own a business or n a trade, profession, or other a any (LLC) or limited liability par | ctivity, either full-ti | _ | y business? |
| | A partner in a part | • | | | | |
| | | | ecutive of a corporation | | | |
| | | | g or equity securities of a corpo | ration | | |
| | No. None of the above | • • | rt 12. n the details below for each bu | einaee | | |
| | os. Oncok an that ap | ory above and min | Describe the nature of the busine | | Employer Identification n | umber |
| | Business Name | | | | Do not include Social Sec | curity number or ITIN. |
| | | | | | EIN: | |
| | Number Street | | Name of accountant or bookkeep | per | Dates business existed | |
| | | | | | The state of the s | |
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| | Business Name | | | | Do not include Social Sec | |
| | | | | | EIN: - | |
| | Number Street | | Name of accountant or bookkeep | ner . | Dates business existed | |
| | | | Maine of accountant of bookkeep | ·GI | Dates pusilless existed | |
| | | _ | | | From To _ | |
| | City | State ZIP Code | | | | |

| | First Name Midd | lle Name La | st Name | | |
|--|--|--|--|---|---|
| _ | | | | | |
| | | | Describe the nature of the bu | ısiness | Employer Identification number |
| Ē | Business Name | | - | | Do not include Social Security number or ITIN. |
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| · | only . | State Zir Code | | | |
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| ☑ No | utions, creditors, one | | Date issued | | |
| | | | | | |
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| N | lame | | MM / DD / YYYY | | |
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| - c | City | State ZIP Code | - - - | | |
| c | City | State ZIP Code | - | | |
| - c rt 12: | Sign Below | | ent of Financial Affairs and any | v attachments, and I de | eclare under penalty of periury that the |
| t 12: | Sign Below re read the answers | s on this <i>Statem</i> e orrect. I understa | and that making a false statem | ent, concealing proper | eclare under penalty of perjury that the rty, or obtaining money or property by fraud |
| t 12: I hav answ in co | Sign Below re read the answers are true and connection with a ba | s on this <i>Statem</i> e orrect. I understa ankruptcy case c | | ent, concealing proper | rty, or obtaining money or property by fraud |
| t 12: I hav answ in co | Sign Below re read the answers | s on this <i>Statem</i> e orrect. I understa ankruptcy case c | and that making a false statem | ent, concealing proper | rty, or obtaining money or property by fraud |
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| I 124 I hav answ in co 18 U. | Sign Below re read the answers vers are true and connection with a ba .S.C. §§ 152, 1341, | s on this <i>Stateme</i> orrect. I understa ankruptcy case c 1519, and 3571. | and that making a false statem an result in fines up to \$250,00 | ent, concealing proper 00, or imprisonment for | rty, or obtaining money or property by fraud |
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| First Name Middle Name Last N |
|--|
| |
| |
| filling) First Name Middle Name Last N |
| filing) First Name Middle Name Last Nates Bankruptcy Court for the: Eastern District of California |

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of <i>Schedule D: C</i> information below. | Creditors Who Have Claims Secured by Property (Official | al Form 106D), fill in the |
|--|--|--|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C |
| Creditor's name: | ☐ Surrender the property. | ☐ No |
| | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | ☐ Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| oodaniig dob. | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| occurring dobs. | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |

Filed 03/28/19 Case 19-21911 Doc 1

| Debtor 1 | Dixie | | Hill | Case number (If known) |
|----------|------------|-------------|-----------|------------------------|
| Debiol 1 | First Name | Middle Name | Last Name | Case number (# known) |

| or any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G), in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet ded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | | |
|--|----------|----------------------------|
| Describe your unexpired personal propert | y leases | Will the lease be assumed? |
| essor's name: | | □ No |
| Description of leased | | ☐ Yes |
| roperty: | | |
| essor's name: | | □ No |
| | | ☐ Yes |
| escription of leased roperty: | | |
| essor's name: | | No |
| Description of leased | | ☐ Yes |
| roperty: | | |
| essor's name: | | ☐ No |
| | | □ Yes |
| Description of leased roperty: | | |
| essor's name: | | □ No |
| Description of leased property: | | ☐ Yes |
| essor's name: | | ☐ No |
| Description of leased property: | | ☐ Yes |
| essor's name: | | □ No |
| Description of leased roperty: | | ☐ Yes |

Filed 03/28/£0m B2030 Case 19-21911 USBC Eastern District of California Doc 1

| n re Dixie Hill | Case Number: |
|---|---|
| | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR |
| Debtor(| (3) |
| Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I | certify that I am the attorney for the above-named debi |
| Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I that compensation paid to me within one year before the filing c services rendered or to be rendered on behalf of the debtor(s) is as follow: | the petition in bankruptcy, or agreed to be paid to me |
| that compensation paid to me within one year before the filing of services rendered or to be rendered on behalf of the debtor(s) if as follow: | the petition in bankruptcy, or agreed to be paid to me n contemplation of or in connection with the bankruptcy |
| services rendered or to be rendered on behalf of the debtor(s) | the petition in bankruptcy, or agreed to be paid to ment contemplation of or in connection with the bankruptcy \$\frac{1,140.10}{4.440.10}\$ |

3. The source of compensation to be paid to me is:

Other (specify)

Debtor Other (specify)

- I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 - I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in contested bankruptcy matters;
 - e. [Other provisions as needed]

| 6. | By agreement with the debtor(s), the above-disclosed fee does not include the following services, insofar as these services are |
|----|---|
| | not mandated by Local Rule 2017-1 of the Eastern District of California. |

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 28, 2019

Date

/s/ Mark Shmorgon

Signature of Attorney - Mark Shmorgon

Law Offices of Mark Shmorgon 5015 Madison Ave., Suite A Sacramento, CA 95841

Phone: 916-640-7599; Email: shmorgonlaw@gmail.com

Name of Law Firm

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | | Liquidation | |
|------------|-------|--------------------|--|
| | | | |
| | \$245 | filing fee | |
| | \$75 | administrative fee | |
| + | \$15 | trustee surcharge | |

total fee

\$335

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee+ \$75 administrative fee\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.